

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000009186

FILED  
Jan 12, 2007  
Secretary of State

Entity Name: FLORIDA ATLANTIC UNIVERSITY SCHOOLS PTO, INC.

## Current Principal Place of Business:

C/O ALEXANDER D. HENDERSON UNIV. SCHOOL  
777 GLADES ROAD  
BOCA RATON, FL 33431

## New Principal Place of Business:

## Current Mailing Address:

C/O ALEXANDER D. HENDERSON UNIV. SCHOOL  
777 GLADES ROAD  
BOCA RATON, FL 33431

## New Mailing Address:

FEI Number: 05-0535572

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ALFANO, JERRY  
C/O ALEXANDER D. HENDERSON UNIVERSITY SCHO  
UNIVERSITY SCHEER  
BOCA RATON, FL 33431 US

## Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: BUSEY, SCOTT  
Address: 7382 NW 45TH AVE.  
City-St-Zip: COCONUT CREEK, FL 33073

Title: VD ( ) Delete  
Name: WILLIAMS, LYNNETTE  
Address: 2705 CARAMBOLA CIRCLE N  
City-St-Zip: COCONUT CREEK, FL 33066

Title: ST ( ) Delete  
Name: COLTMAN, HEATHER  
Address: 1700 SW 13TH ST  
City-St-Zip: BOCA RATON, FL 33486

Title: VST ( ) Delete  
Name: CUNNINGHAM, JANICE  
Address: 22595 SW 6TH STREET  
City-St-Zip: BOCA RATON, FL 33433

Title: T ( ) Delete  
Name: AYOTTE, HANK  
Address: 4499 NW BOCA RATON RD  
City-St-Zip: BOCA RATON, FL 33431

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HANK AYOTTE

TREA

01/12/2007

Electronic Signature of Signing Officer or Director

Date