

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000000860

FILED
Mar 02, 2007
Secretary of State

Entity Name: CALOOSA ELEMENTARY PTO, INC.

Current Principal Place of Business:

620 S. DEL PRADO BLVD.
CAPE CORAL, FL 33990

New Principal Place of Business:

620 DEL PRADO BLVD S
CAPE CORAL, FL 33990

Current Mailing Address:

620 S. DEL PRADO BLVD.
CAPE CORAL, FL 33990

New Mailing Address:

620 DEL PRADO BLVD S
CAPE CORAL, FL 33990

FEI Number: 04-3737867

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEBLANC, MARY L
1036 SE 4TH ST
CAPE CORAL, FL 33990 US

Name and Address of New Registered Agent:

BYRD-FERRINO, DEANNA M
1320 SE 5TH TER
CAPE CORAL, FL 33990 US

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: DEANNA BYRD-FERRINO

03/02/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: O'KERN, KIM
Address: 1117 LENOX CT
City-St-Zip: CAPE CORAL, FL 33904 US

Title: S () Delete
Name: SANTOS, MARGARET M
Address: 1021 SE 5TH ST
City-St-Zip: CAPE CORAL, FL 33990 US

Title: T () Delete
Name: LEBLANC, MARY L
Address: 1036 SE 4TH ST
City-St-Zip: CAPE CORAL, FL 33990 US

Title: V (X) Delete
Name: MITCHELL, SUSAN
Address: 920 SE 18TH ST
City-St-Zip: CAPE CORAL, FL 33990

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MITCHELL, SUSAN M
Address: 1417 SE 19TH LN
City-St-Zip: CAPE CORAL, FL 33990 US

Title: T (X) Change () Addition
Name: BYRD-FERRINO, DEANNA M
Address: 1320 SE 5TH TER
City-St-Zip: CAPE CORAL, FL 33990 US

Title: V (X) Change () Addition
Name: LEBLANC, MARY L
Address: 1036 SE 4TH ST
City-St-Zip: CAPE CORAL, FL 33990 US

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: DEANNA BYRD-FERRINO

T

03/02/2007

Electronic Signature of Signing Officer or Director

Date