2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000007315

FILED Aug 30, 2008 Secretary of State

Entity Name: DANTE FASCELL ELEMENTARY SCHOOL PTA. INC.

Current Principal Place of Business: New Principal Place of Business:

15625 SW 80 STREET MIAMI, FL 33193 US

Current Mailing Address: New Mailing Address:

15625 SW 80 STREET MIAMI, FL 33193 US

FEI Number: 20-0292010 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BLANCO, JUANMIGUEL GAMUNDI, DEBBIE
15625 SW 80 STREET 15625 SW 80 STREET
MIAMI, FL 33193 US MIAMI, FL 33193 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: DEBBIE GAMUNDI 08/30/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 P/D
 () Delete
 Title:
 P/D
 (X) Change () Addition

 Name:
 BLANCO, JUANMIGUEL
 Name:
 GAMUNDI, DEBBIE

 Name:
 SEANCE, SOANNIGSEE
 Name:
 SANONDI, BEBBIL

 Address:
 15625 SW 80 STREET
 Address:
 15625 SW 80 STREET

 City-St-Zip:
 MIAMI, FL 33193 US
 City-St-Zip:
 MIAMI, FL 33193 US

 Name
 FEREZ-BLANCO, RITA
 Name
 FIALLOS, ROCIO

 Address:
 15625 SW 80 STREET
 Address:
 15625 SW 80 STREET

 City-St-Zip:
 MIAMI, FL 33193 US
 City-St-Zip:
 MIAMI, FL 33193 US

Title: T/D () Delete Title: () Change () Addition

 Name:
 ANN, FEATHERS
 Name:

 Address:
 15625 SW 80 STREET
 Address:

 City-St-Zip:
 MIAMI, FL 33193 US
 City-St-Zip:

Title: S/D (X) Delete Title: () Change () Addition

 Name:
 NAVARRO, YVONNE
 Name:

 Address:
 15625 SW 80 STREET
 Address:

 City-St-Zip:
 MIAMI, FL 33193
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: ANN L. FEATHERS T/D 08/30/2008