

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000007458

FILED  
May 02, 2005  
Secretary of State

Entity Name: MCKEEL ELEMENTARY ACADEMY PTO, INC.

**Current Principal Place of Business:**

411 N. FLORIDA AVE.  
LAKELAND, FL 33801

**New Principal Place of Business:**

**Current Mailing Address:**

411 N. FLORIDA AVE.  
LAKELAND, FL 33801

**New Mailing Address:**

FEI Number: 20-0202172      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
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:**

MORRIS, JUDI  
411 N. FLORIDA AVE.  
LAKELAND, FL 33801      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: P      ( ) Delete  
Name: BLACK, SHERRY  
Address: 5017 LOG CABIN DRIVE  
City-St-Zip: LAKELAND, FL 33810

Title: V      ( ) Delete  
Name: BACKES, EMILY  
Address: 2173 RAINBOWER DR.  
City-St-Zip: LAKELAND, FL 33810

Title: S      ( ) Delete  
Name: EDMOND, SHERRY  
Address: 713 PONDEROSA DR. E.  
City-St-Zip: LAKELAND, FL 33823

Title: T      ( ) Delete  
Name: WILSON, STEPHANIE  
Address: 904 FLAG CT.  
City-St-Zip: LAKELAND, FL 33823

Title: T      ( ) Delete  
Name: GLERUM, LORI ASST  
Address: 5409 GREENFIELD ACRES RD.  
City-St-Zip: LAKELAND, FL 33810

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: V      (X) Change ( ) Addition  
Name: LAKEMAN, MICHELLE  
Address: 3210 BELLFLOWER WAY  
City-St-Zip: LAKELAND, FL 33811

Title: S      (X) Change ( ) Addition  
Name: THOMPSON, JUDITH  
Address: 2403 SUMMITVIEW DRIVE  
City-St-Zip: LAKELAND, FL 33813 US

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

Title: T      (X) Change ( ) Addition  
Name: OESTREICH, PAGE ASST  
Address: 4514 WARING ROAD  
City-St-Zip: LAKELAND, FL 33811

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: SHERRY BLACK

P

05/02/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date