

2010 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N04000001538

FILED
Mar 17, 2010
Secretary of State

Entity Name: ELIZABETH COBB MIDDLE SCHOOL PTO, INC.

Current Principal Place of Business:

915 HILLCREST AVE
TALLAHASSEE, FL 32308

New Principal Place of Business:

Current Mailing Address:

915 HILLCREST AVE
TALLAHASSEE, FL 32308

New Mailing Address:

FEI Number: 33-1082148

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROGERS, LAURA
915 HILLCREST AVE
TALLAHASSEE, FL 32308 US

Name and Address of New Registered Agent:

GODWIN, KRY S
915 HILLCREST AVE
TALLAHASSEE, FL 32308 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: KRY S GODWIN

03/17/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: GODWIN, KRY S MRS.
Address: 915 HILLCREST AVE
City-St-Zip: TALLAHASSEE, FL 32308 US

Title: T
Name: WETHERINGTON, LANISHA MRS.
Address: 915 HILLCREST AVE
City-St-Zip: TALLAHASSEE, FL 32308 US

Title: VP
Name: ATWATER, SYDNA
Address: 915 HILLCREST AVE
City-St-Zip: TALLAHASSEE, FL 32308 US

Title: SEC
Name: WALLACE, RENAE
Address: P.O. BOX 10641
City-St-Zip: TALLAHASSEE, FL 32302 US

Title: --
Name: --, -- --
Address: --
City-St-Zip: --, -- --

Title: --
Name: --, -- --
Address: --
City-St-Zip: --, -- --

I hereby 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 all other like empowered.

SIGNATURE: KRY S GODWIN

PRES

03/17/2010

Electronic Signature of Signing Officer or Director

Date