

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000005032

FILED  
Jun 29, 2008  
Secretary of State

**Entity Name:** FRANK S. HARTSFIELD ELEMENTARY SCHOOL PARENT-TEACHER ORGANIZATION, INC.

**Current Principal Place of Business:**

1414 CHOWKEEBIN NENE  
TALLAHASSEE, FL 32301

**New Principal Place of Business:**

**Current Mailing Address:**

1414 CHOWKEEBIN NENE  
TALLAHASSEE, FL 32301

**New Mailing Address:**

**FEI Number:** 59-2996096      **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:**

SMITH, KATHLEEN  
HARTSFIELD ELEMENTARY  
1414 CHOWKEEBIN NENE  
TALLAHASSEE, FL 32301 US

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

JONES, FAYE R MRS  
HARTSFIELD ELEMENTARY  
1414 CHOWKEEBIN NENE  
TALLAHASSEE, FL 32301 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: FAYE JONES

06/29/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: SMITH, KATHLEEN  
Address: 1136 MAPLE  
City-St-Zip: TALLAHASSEE, FL 32301

Title: S ( ) Delete  
Name: APRIL, VICKERY  
Address: 1009 E. MAGNOLIA DR  
City-St-Zip: TALLAHASSEE, FL 32301

Title: T ( ) Delete  
Name: SUHR, JACINDA  
Address: 2231 GLENWOOD LANE  
City-St-Zip: TALLAHASSEE, FL 32308

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

Title: P (X) Change ( ) Addition  
Name: JONES, FAYE  
Address: 2305 OHBAH NENE  
City-St-Zip: TALLAHASSEE, FL 32301

Title: T (X) Change ( ) Addition  
Name: VICKERY, APRIL  
Address: 1009 E. MAGNOLIA DR  
City-St-Zip: TALLAHASSEE, FL 32301

Title: VP (X) Change ( ) Addition  
Name: CARTER, QIANA  
Address: 3410 MIZELL DRIVE  
City-St-Zip: TALLAHASSEE, FL 32301

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: FAYE JONES

P

06/29/2008

Electronic Signature of Signing Officer or Director

Date