

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000005873

FILED  
Sep 03, 2008  
Secretary of State

Entity Name: PLEW ELEMENTARY PARENT LEADERS ASSOCIATION, INC.

**Current Principal Place of Business:**

220 PINE AVENUE  
C/O JAMES E. PLEW ELEMENTARY  
NICEVILLE, FL 32578

**New Principal Place of Business:**

**Current Mailing Address:**

220 PINE AVENUE  
C/O JAMES E. PLEW ELEMENTARY  
NICEVILLE, FL 32578

**New Mailing Address:**

FEI Number: 20-1267801      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:**

SHEEKLEY, LESLIE D  
1201 EGLIN PARKWAY  
C/O CHESSER & BARR, P.A.  
SHALIMAR, FL 32579 US

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

TAYLOR, MARION  
413 ROSCOMMON BLVD  
NICEVILLE, FL 32578 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: MARION R. TAYLOR

09/03/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: SIMPSON, JANET  
Address: 4329 HIDDEN LAKES DR.  
City-St-Zip: NICEVILLE, FL 32578

Title: VP ( ) Delete  
Name: BARTHEL, KATHY  
Address: 234 WINDWARD WAY  
City-St-Zip: NICEVILLE, FL 32578

Title: S ( ) Delete  
Name: HYBI, KATHERINE  
Address: 311 RUCKEL  
City-St-Zip: NICEVILLE, FL 32578

Title: T ( ) Delete  
Name: COLEMAN, LESLIE  
Address: 1504 GLENLAKE CIRCLE  
City-St-Zip: NICEVILLE, FL 32578

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

Title: P (X) Change ( ) Addition  
Name: TAYLOR, MARION  
Address: 413 ROSCOMMON BLVD  
City-St-Zip: NICEVILLE, FL 32578

Title: VP (X) Change ( ) Addition  
Name: MARKWARDT, CHRIS  
Address: 234 WINDWARD WAY  
City-St-Zip: NICEVILLE, FL 32578

Title: S (X) Change ( ) Addition  
Name: WARSHESKI, LISA  
Address: 211 RUCKEL DRIVE  
City-St-Zip: NICEVILLE, FL 32578

Title: T (X) Change ( ) Addition  
Name: SPAULDING, PAM  
Address: 1500 GLENLAKE CIRCLE  
City-St-Zip: NICEVILLE, FL 32578

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: MARION R. TAYLOR

P

09/03/2008

Electronic Signature of Signing Officer or Director

Date