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: New Principal Place of Business:

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

Current Mailing Address: New Mailing Address:

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

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: Name and Address of New Registered Agent:

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 SIMPSON, JANET
 Name:
 TAYLOR, MARION

 Address:
 4329 HIDDEN LAKES DR.
 Address:
 413 ROSCOMMON BLVD

 City-St-Zip:
 NICEVILLE, FL 32578
 NICEVILLE, FL 32578

Title: VP () Delete Title: VP (X) Change () Addition

 Name:
 BARTHEL, KATHY
 Name:
 MARKWARDT, CHRIS

 Address:
 234 WINDWARD WAY
 Address:
 234 WINDWARD WAY

 City-St-Zip:
 NICEVILLE, FL 32578
 City-St-Zip:
 NICEVILLE, FL 32578

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

 Name:
 HYBI, KATHERINE
 Name:
 WARSHESKI, LISA

 Address:
 311 RUCKEL
 Address:
 211 RUCKEL DRIVE

 City-St-Zip:
 NICEVILLE, FL 32578
 City-St-Zip:
 NICEVILLE, FL 32578

Name:COLEMAN, LESLIEName:SPAULDING, PAMAddress:1504 GLENLAKE CIRCLEAddress:1500 GLENLAKE CIRCLECity-St-Zip:NICEVILLE, FL 32578City-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