

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000006760

FILED
Apr 17, 2007
Secretary of State

Entity Name: PARKE HOUSE ACADEMY PARENT TEACHER COMMITTEE, INC.

Current Principal Place of Business:

1776 MINNESOTA AVE
WINTER PARK, FL 32789

New Principal Place of Business:

Current Mailing Address:

1776 MINNESOTA AVE
WINTER PARK, FL 32789

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BERGIN, SCOTT J PRES
1776 MINNESOTA AVE
WINTER PARK, FL 32789 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: MR. () Delete
Name: BERGIN, SCOTT J PRES
Address: 2031 SANTA ANTILLES
City-St-Zip: ORLANDO, FL 32806

Title: MR () Delete
Name: BARRETT, JOHN VP
Address: 550 LAKE MILLS RD
City-St-Zip: CHULUOTA, FL 32766

Title: MS. () Delete
Name: JOHNSON, CHERYL A TREAS
Address: 1621 WESTCHESTER AVE.
City-St-Zip: WINTER PARK, FL 32789

Title: MS. () Delete
Name: O'GRADY, LISA P SECY
Address: 1320 WEBSTER ST.
City-St-Zip: ORLANDO, FL 32804

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: CHERYL A JOHNSON

TRES

04/17/2007

Electronic Signature of Signing Officer or Director

Date