2011 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N04000007147

FILED May 25, 2011 Secretary of State

Entity Name: TROPIC ISLES ELEMENTARY SCHOOL PARENT-TEACHER ORGANIZATION, INC.

Current Principal Place of Business: New Principal Place of Business:

5145 ORANGE GROVE BLVD. NORTH FT. MYERS, FL 33903

Current Mailing Address: New Mailing Address:

5145 ORANGE GROVE BLVD. NORTH FT. MYERS, FL 33903

FEI Number: 02-0605549 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

BRYANT, DONALD

5145 ORANGE GROVE BLVD.

NORTH FT. MYERS, FL 33903 US

MACCHIA, BRANDY

5145 ORANGE GROVE BLVD.

NORTH FT. MYERS, FL 33903 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: DALE WHEELER 05/25/2011

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: D

Name: MACCHIA, BRANDY

Address: 5145 ORANGE GROVE BLVD. City-St-Zip: NORTH FT. MYERS, FL 33903

Title: F

Name: WHEELER, DALE

Address: 5145 ORANGE GROVE BLVD City-St-Zip: NORTH FORT MYERS, FL 33903

Title: VP

Name: BARTLEY, NICK

Address: 5145 ORANGE GROVE BLVD
City-St-Zip: NORTH FORT MYERS, FL 33903

Title: T

Name: MACCHIA, MARK

Address: 5145 ORANGE GROVE BLVD
City-St-Zip: NORTH FORT MYERS, FL 33903

Title: S

 Name:
 MCCREART, MARK

 Address:
 5145 ORANGE GROVE BLVD

 City-St-Zip:
 NORTH FORT MYERS, FL 33903

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: DALE WHEELER P 05/25/2011