

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 25, 2006
Secretary of State**

DOCUMENT# N04000010257

Entity Name: CECIL E. GRAY MIDDLE SCHOOL PARENT-TEACHER ORGANIZATION, INC.

Current Principal Place of Business:

205 E. MAGNOLIA STREET
GROVELAND, FL 34736

New Principal Place of Business:

Current Mailing Address:

205 E. MAGNOLIA STREET
GROVELAND, FL 34736

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:

BELL, LINDA L
12213 CYPRESS BOULEVARD
GROVELAND, FL 34736 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: D () Delete
Name: KEATING, SONYIA
Address: 6629 LAKE ERIE ROAD
City-St-Zip: GROVELAND, FL 34736

Title: D () Delete
Name: ROBBINS, SHELLY
Address: 5801 MULBERRY STREET
City-St-Zip: GROVELAND, FL 34736

Title: D () Delete
Name: BELL, LINDA L
Address: 12213 CYPRESS BEND
City-St-Zip: GROVELAND, FL 34736

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: HOOD, KIMBERLY
Address: 11114 CRESCENT BAY BLVD
City-St-Zip: CLERMONT, FL 34711

Title: D (X) Change () Addition
Name: PORTER, SHELLI
Address: 11525 NELLIE OAKS BEND
City-St-Zip: CLERMONT, FL 34711

Title: D (X) Change () Addition
Name: HAULK, TAMMY
Address: 11909 HERON COVE
City-St-Zip: CLERMONT, FL 34711

Title: D () Change (X) Addition
Name: JONES, PATTI
Address: 8834 DESOUSA COURT
City-St-Zip: CLERMONT, FL 34711

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: KIMBERLY K. HOOD

D

04/25/2006

Electronic Signature of Signing Officer or Director

Date