

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000011231

FILED  
Feb 23, 2011  
Secretary of State

**Entity Name:** FRUIT COVE MIDDLE SCHOOL PARENT TEACHER ORGANIZATION, INC.

**Current Principal Place of Business:**

3180 RACETRACK ROAD  
JACKSONVILLE, FL 32259

**New Principal Place of Business:**

**Current Mailing Address:**

3180 RACETRACK ROAD  
JACKSONVILLE, FL 32259

**New Mailing Address:**

**FEI Number:** 20-2013041

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

HURLEY, LINDA  
1399 FRUIT COVE ROAD NORTH  
JACKSONVILLE, FL 32259 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:** DP  
**Name:** RAZURI, CARLA  
**Address:** 102 SLYVAN GLEN  
**City-St-Zip:** SAN MATEO, FL 32187

**Title:** DS  
**Name:** MCGLYNN, SUE  
**Address:** 400 HUCKLEBERRY TRAIL  
**City-St-Zip:** JACKSONVILLE, FL 32259

**Title:** DT  
**Name:** HURLEY, LINDA  
**Address:** 1399 FRUIT COVE ROAD NORTH  
**City-St-Zip:** JACKSONVILLE, FL 32259

**Title:** DV-F  
**Name:** SANCHEZ, LAURA  
**Address:** 253 EAST BETONY WAY  
**City-St-Zip:** JACKSONVILLE, FL 32259

**Title:** DV-F  
**Name:** ALVAREZ, NICOLE  
**Address:** 1416 JESSICA WAY  
**City-St-Zip:** JACKSONVILLE, FL 32259

**Title:** DV-M  
**Name:** WEISBLATT, JILL  
**Address:** 428 HUCKLEBERRY TRAIL  
**City-St-Zip:** JACKSONVILLE, FL 32259

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:** LINDA S. HURLEY

DT

02/23/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date