

2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N04000011319

FILED
Oct 17, 2007
Secretary of State

Entity Name: SPRINGWOOD ELEMENTARY PTO INC

Current Principal Place of Business:

3801 FRED GEORGE ROAD
TALLAHASSEE, FL 32303

New Principal Place of Business:

Current Mailing Address:

3801 FRED GEORGE ROAD
TALLAHASSEE, FL 32303

New Mailing Address:

FEI Number: 20-2733440

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DUNLAP, LESLIE Q
4795 LAKELY DRIVE
TALLAHASSEE, FL 32303 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: LESLIE Q DUNLAP

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WEBB, RANDI
Address: 4114 MIRAFLORES DR
City-St-Zip: TALLAHASSEE, FL 32303

Title: V () Delete
Name: RUBES, LISA
Address: 5612 CYPRESS CR
City-St-Zip: TALLAHASSEE, FL 32303

Title: T (X) Delete
Name: DUNLAP, LESLIE Q
Address: 4795 LAKELY DRIVE
City-St-Zip: TALLAHASSEE, FL 32303

Title: S (X) Delete
Name: VIGUE, CHERYL
Address: 2597 BRENTSHIRE DRIVE
City-St-Zip: TALLAHASSEE, FL 32303

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: RUBES, LISA
Address: 5612 CYPRESS DR
City-St-Zip: TALLAHASSEE, FL 32303

Title: T (X) Change () Addition
Name: DUNLAP, LESLIE
Address: 4795 LAKELY DRIVE
City-St-Zip: TALLAHASSEE, FL 32303

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 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: LESLIE Q DUNLAP

TREA

10/17/2007

Electronic Signature of Signing Officer or Director

Date