

2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED

07 JAN -2 PM 5:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N05000012894

1. Entity Name
NORTH BROWARD ACADEMY OF EXCELLENCE PTA,
INC.



Principal Place of Business
961 SW 71 ST AVE
NORTH LAUDERDALE, FL 33068

Mailing Address
961 SW 71 ST AVE
NORTH LAUDERDALE, FL 33068

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



REINSTATEMENT 2006
10092006 REIN:NP CR2E099 (11/05)

4. FEI Number

72-1609586

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

DUBBAR, ALICIA
2474 NW 68TH WAY
SUNRISE, FL 33313

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

7. Name and Address of New Registered Agent

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$61.25
After January 1, 2007, Fee will be \$122.50

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE DP ☐ Delete
NAME RIORDAN, KRISTEN
STREET ADDRESS 8799 NW 39TH STREET
CITY-ST-ZIP SUNRISE, FL 33351

TITLE DP ☐ Delete
NAME CELONA, KELLY
STREET ADDRESS 7934 SW 8TH STREET
CITY-ST-ZIP NORTH LAUDERDALE, FL 33068

TITLE DV ☐ Delete
NAME SEARSA, MIA
STREET ADDRESS 520 SW 81ST TERRACE
CITY-ST-ZIP NORTH LAUDERDALE, FL 33068

TITLE DS ☒ Delete
NAME LISEO, ROBIN
STREET ADDRESS 5602 NW 48TH WAY
CITY-ST-ZIP TAMARAC, FL 33319

TITLE DT ☒ Delete
NAME RIGNEY, MEGAN
STREET ADDRESS 19250 NW 22ND STREET
CITY-ST-ZIP PEMBROKE PINES, FL 33029

TITLE DT ☐ Delete
NAME DUNBAR, ALICIA
STREET ADDRESS 2674 NW 68TH WAY
CITY-ST-ZIP SUNRISE, FL 33313

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME 500082895505
STREET ADDRESS 01/02/07--01019--009 **\$1.25
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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STREET ADDRESS
CITY-ST-ZIP

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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Alicia Dunbar

ALICIA DUNBAR

Date

12/18/06 954-895-2868

Daytime Phone #