2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000012365

FILED Aug 30, 2007 Secretary of State

Entity Name: SEMINOLE SPRINGS ELEMENTARY SCHOOL PTO, INC.

	rincipal Place of Business:	New Principal Place of Business:
	EST HUFF ROAD FL 32736	
urrent M	lailing Address:	New Mailing Address:
	EST HUFF ROAD FL 32736	
accordan	r: 51-0612735 FEI Number Applied For (nce with s. 607.193(2)(b), F.S., the corporation of d Address of Current Registered Agen	did not receive the prior notice.
80YD, AE 6200 WE		name and Address of New Registered Agent.
	e named entity submits this statement for e of Florida.	the purpose of changing its registered office or registered agent, or both,
SIGNATU	RE:	
	Electronic Signature of Registered	d Agent Date
FFICER	S AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR
itle: ame: ddress:	P () Delete HOFFMAN, JEANINE 33854 VENICE LANE	Title: () Change () Addition Name: Address:
ity-St-Zip:	SORRENTO, FL 32776	City-St-Zip:
itle: ame: ddress:	V () Delete HARGROVES, MARIA 36622 NORTH THRILL HILL ROAD EUSTIS, FL 32736	City-St-Zip: Title: () Change () Addition Name: Address: City-St-Zip:
itle: ame: ddress: itly-St-Zip: itle: ame: ddresss: ity-St-Zip: ddress: ity-St-Zip:	V () Delete HARGROVES, MARIA 36622 NORTH THRILL HILL ROAD	Title: () Change () Addition Name: Address:
itle: ame: ddress: ity-St-Zip: itle: ame: ddress:	V () Delete HARGROVES, MARIA 36622 NORTH THRILL HILL ROAD EUSTIS, FL 32736 T () Delete LAJEUNESSE, CINDY 34632 LA PLACE COURT	Title: () Change () Addition Name: Address: City-St-Zip: Title: () Change () Addition Name: Address:
itle: ame: ddress: ity-St-Zip: itle: ame: ddress: ity-St-Zip: itle: ame: ddress:	V () Delete HARGROVES, MARIA 36622 NORTH THRILL HILL ROAD EUSTIS, FL 32736 T () Delete LAJEUNESSE, CINDY 34632 LA PLACE COURT EUSTIS, FL 32736 T () Delete STOOTHOFF, BETH 3150 LAUREL DRIVE	Title: () Change () Addition Name: Address: City-St-Zip: 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: JEANINE HOFFMAN P 08/30/2007