2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 26, 2009
Secretary of State

DOCUMENT# N07000007919

Entity Name: PTSO OF MCKEEL ACADEMY OF TECHNOLOGY, INC.

Current Principal Place of Business:

1810 W. PARKER STREET
LAKELAND, FL 33815 US

New Principal Place of Business:

Current Mailing Address:

1810 W. PARKER STREET
LAKELAND, FL 33815 US

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MORRIS, BRENDA
1810 W. PARKER ST
LAKELAND, FL 33815 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: P ( ) Delete
Name: MORRIS, BRENDA
Address: 1810 W. PARKER ST
City-St-Zip: LAKELAND, FL 33815

Title: T ( ) Delete
Name: SHIELDS, LATISHA
Address: 1810 W. PARKER ST
City-St-Zip: LAKELAND, FL 33815

Title: S ( ) Delete
Name: MARRERO, TIFFANY
Address: 1810 W. PARKER ST.
City-St-Zip: LAKELAND, FL 33815

Title: VP ( ) Delete
Name: FOWLER, IRENE
Address: 1810 W. PARKER STREET
City-St-Zip: LAKELAND, FL 33815 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: LATISHA SHIELDS T 01/26/2009
Electronic Signature of Signing Officer or Director — Date