

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000008233

FILED  
Apr 29, 2008  
Secretary of State

**Entity Name:** BENNETT C RUSSELL ELEMENTARY PARENT TEACHER ORGANIZATION INC.

**Current Principal Place of Business:**

3740 EXCALIBUR WAY  
MILTON, FL 32583

**New Principal Place of Business:**

**Current Mailing Address:**

3740 EXCALIBUR WAY  
MILTON, FL 32583

**New Mailing Address:**

**FEI Number:** 45-0567552

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SMITH, PAM  
3740 EXCALIBUR WAY  
MILTON, FL 32583 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: PD ( ) Delete  
Name: POLLOCK, LEIGH A  
Address: 1104 ADRIAN WAY  
City-St-Zip: MILTON, FL 32583

Title: VPD ( ) Delete  
Name: ADAMS, MELISSA  
Address: 3259 BERNATH DRIVE  
City-St-Zip: MILTON, FL 32583

Title: TD ( ) Delete  
Name: CHANNELL, ANGELA  
Address: 3365 MILLS BAYOU DRIVE  
City-St-Zip: MILTON, FL 32583

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: ADAMS, MELISSA  
Address: 3259 BERNATH DRIVE  
City-St-Zip: MILTON, FL 32583

Title: VPD (X) Change ( ) Addition  
Name: DEDRA, FLEMING  
Address: 5713 ABBINGTON LANE  
City-St-Zip: MILTON, FL 32583

Title: TD (X) Change ( ) Addition  
Name: GILLESPIE, RHONDA  
Address: 4708 HENRY WILSON CREEK DRIVE  
City-St-Zip: MILTON, FL 32583

Title: SEC ( ) Change (X) Addition  
Name: RUIZ, ERIKA  
Address: 4426 CHANTILLY WAY  
City-St-Zip: MILTON, FL 32583

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: MELISSA ADAMS

PRD

04/29/2008

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

\_\_\_\_\_  
Date