2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N07000008445

FILED Oct 06, 2009 Secretary of State

Entity Name: R. DAN NOLAN MIDDLE SCHOOL P.T.O., INC.					
Current P	rincipal Place of Business:	New Princ	New Principal Place of Business:		
	ENBROOK BLVD. ON, FL 34202				
Current Mailing Address:		New Maili	New Mailing Address:		
	ENBROOK BLVD. ON, FL 34202				
FEI Number: In accordance	26-1234925 FEI Number Applied For () FEI Nuce with s. 607.193(2)(b), F.S., the corporation did not receive	umber Not App the prior notic		Certificate of Status Desired ()	
Name and	Address of Current Registered Agent:	Name and	Address of	New Registered Agent:	
SNYDER, RYAN L ESQ. 8784 SR 70 EAST SUITE 102 BRADENTON, FL 34202 US			SNYDER, RYAN L ESQ. 11031 GATEWOOD DRIVE BRADENTON, FL 34211 US		
	named entity submits this statement for the purpose of Florida.	of changing i	its registered	office or registered agent, or both,	
SIGNATURE: RYAN SNYDER			10/06/2009		
	Electronic Signature of Registered Agent			Date	
OFFICERS AND DIRECTORS:		ADDITION	S/CHANGES	S TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () Delete WILLIAMS, KIM 13215 SWALLOWTAIL DR. BRADENTON, FL 34202	Title: Name: Address: City-St-Zip:	() Change ()Addition	
Title: Name: Address: City-St-Zip:	VP () Delete VERINDER, MONICA 6710 OVILLBACK LANE BRADENTON, FL 34202	Title: Name: Address: City-St-Zip:	KLOSNER, JE	RVATORY CIRCLE	
Title: Name: Address: City-St-Zip:	T () Delete GERARDI, CHERYL 6245 FOXGLOVE LN BRADENTON, FL 34202	Title: Name: Address: City-St-Zip:	T (2 NASSAB, COL 7812 ROSEH/ BRADENTON,	ALL CV	
Title: Name: Address: City-St-Zip:	S () Delete DECECCU, ROBIN 9419 ROYAL CALCUTTA PL BRADENTON, FL 34202	Title: Name: Address: City-St-Zip:	DECECCO, R	CALCUTTA PL	
Title: Name: Address: City-St-Zip:	AA () Delete SWANSON, NANCY 6615 GREENBROOK BLVD BRADENTON, FL 34202	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: KIM WILLIAMS Ρ 10/06/2009