

**2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED  
Aug 09, 2012  
Secretary of State**

DOCUMENT# N07000008714

**Entity Name:** RAMBLEWOOD MIDDLE SCHOOL PARENT TEACHER ORGANIZATION INC.**Current Principal Place of Business:**8505 WEST ATLANTIC BLVD.  
CORAL SPRINGS, FL 33071**New Principal Place of Business:****Current Mailing Address:**8505 WEST ATLANTIC BLVD.  
CORAL SPRINGS, FL 33071**New Mailing Address:**

FEI Number: 51-0595295

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**NIEVES, WANDA  
9703 NW 20TH STREET  
CORAL SPRINGS, FL 33071 US**Name and Address of New Registered Agent:**WOLFE, ELISA P  
501 NW 107TH TERRACE  
CORAL SPRINGS, FL 33071 US

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: ELISA WOLFE

08/09/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**Title: PRES  
Name: MARSHALL-COHEN, LYNN  
Address: 8505 WEST ATLANTIC BLVD.  
City-St-Zip: CORAL SPRINGS, FL 33071Title: TRES  
Name: WOLFE, ELISA  
Address: 8505 WEST ATLANTIC BLVD.  
City-St-Zip: CORAL SPRINGS, FL 33071Title: ATRE  
Name: ZAICHICK, STACEY  
Address: 8505 WEST ATLANTIC BLVD.  
City-St-Zip: CORAL SPRINGS, FL 33071Title: SEC  
Name: REGOLIZIO, DENISE  
Address: 8505 WEST ATLANTIC BLVD.  
City-St-Zip: CORAL SPRINGS, FL 33071

I hereby 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 all other like empowered.

SIGNATURE: ELISA WOLFE

TREA

08/09/2012

Electronic Signature of Signing Officer or Director

Date