

2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Oct 27, 2008
Secretary of State

DOCUMENT# N07000010106

Entity Name: OKEEHEELEE MIDDLE SCHOOL PTSO, INC.

Current Principal Place of Business:

2200 PINEHURST DR.
GREENACRES, FL 33413

New Principal Place of Business:

Current Mailing Address:

2200 PINEHURST DR.
GREENACRES, FL 33413

New Mailing Address:

FEI Number: 74-3203286 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

KINGSLEY, PATRICIA
1603 64TH DR. SOUTH
W. PALM BCH, FL 33415 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: PATRICIA KINGSLEY

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: KINGSLEY, PATRICIA
Address: 1603 64TH DR. SOUTH
City-St-Zip: W. PALM BCH, FL 33415

Title: VD () Delete
Name: COLUZZI, EDWARD
Address: 1533 OLIVE TREE CIR.
City-St-Zip: GREENACRES, FL 33413

Title: TD () Delete
Name: GROCHOWSKI, CELIA
Address: 6608 WINDMILL WAY
City-St-Zip: GREENACRES, FL 33413

Title: SD () Delete
Name: FONSECA, SARA
Address: 1557 PEBBLE BCH LANE
City-St-Zip: GREENACRES, FL 33413

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VD (X) Change () Addition
Name: KINGSLEY, PATRICIA
Address: 1603 64TH DR. SOUTH
City-St-Zip: W. PALM BCH, FL 33415

Title: PD (X) Change () Addition
Name: COLUZZI, EDWARD
Address: 1533 OLIVE TREE CIR.
City-St-Zip: GREENACRES, FL 33413

Title: TD (X) Change () Addition
Name: GROCHOWSKI, THOMAS
Address: 6608 WINDMILL WAY
City-St-Zip: GREENACRES, FL 33413

Title: SD (X) Change () Addition
Name: VERONICA, PAGGEOTT
Address: 2200 PINEHURST DRIVE
City-St-Zip: GREENACRES, FL 33413

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: THOMAS GROCHOWSKI

TD

10/27/2008

Electronic Signature of Signing Officer or Director

Date