

# 2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N08000009069

**FILED**  
**Oct 12, 2009**  
**Secretary of State**

**Entity Name:** AMERICAN PREPARATORY ACADEMY PARENT TEACHER ORGANIZATION CORP

**Current Principal Place of Business:**

4850 S. PINE ISLAND ROAD  
DAVIE, FL 33328

**New Principal Place of Business:**

**Current Mailing Address:**

4850 S. PINE ISLAND ROAD  
DAVIE, FL 33328

**New Mailing Address:**

**FEI Number:** 26-3474264      **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:**

BRICENO, ELIZABETH  
4850 S. PINE ISLAND ROAD  
DAVIE, FL 33328      US

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

LEON, NANCY  
4850 S. PINE ISLAND ROAD  
DAVIE, FL 33328      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: NANCY LEON

10/12/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: KARPINSKI, THERESA  
Address: 4850 S. PINE ISLAND ROAD  
City-St-Zip: DAVIE, FL 33328

Title: VP ( ) Delete  
Name: POWERS, MIRANDA  
Address: 4850 S. PINE ISLAND ROAD  
City-St-Zip: DAVIE, FL 33328

Title: T ( ) Delete  
Name: LEON, NANCY  
Address: 4850 S. PINE ISLAND ROAD  
City-St-Zip: DAVIE, FL 33328

Title: S ( ) Delete  
Name: SOBARAN, KAREM  
Address: 4850 S. PINE ISLAND ROAD  
City-St-Zip: DAVIE, FL 33328

Title: T R ( ) Delete  
Name: OJEDA, JEANETTE  
Address: 4850 S. PINE ISLAND ROAD  
City-St-Zip: DAVIE, FL 33328

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

Title: P (X) Change ( ) Addition  
Name: URBAY, ELSIE  
Address: 4850 S. PINE ISLAND ROAD  
City-St-Zip: DAVIE, FL 33328

Title: VP (X) Change ( ) Addition  
Name: ALEXANDER, CRYSTAL  
Address: 4850 S. PINE ISLAND ROAD  
City-St-Zip: DAVIE, FL 33328

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

Title: S (X) Change ( ) Addition  
Name: CESPEDES, JOHAIRA  
Address: 4850 S. PINE ISLAND ROAD  
City-St-Zip: DAVIE, FL 33328

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: NANCY LEON

T

10/12/2009

Electronic Signature of Signing Officer or Director

Date