2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000009873

FILED Jun 04, 2009 Secretary of State

Entity Name: R.J. MURRAY MIDDLE SCHOOL PARENT TEACHER ORGANIZATION INCORPORATED

Current Principal Place of Business: New Principal Place of Business: 150 N. HOLMES BLVD ST. AUGUSTINE, FL 32084 **Current Mailing Address: New Mailing Address:** 150 N. HOLMES BLVD ST. AUGUSTINE, FL 32084 FEI Number: 26-3603269 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: Name and Address of New Registered Agent: GUZZO, DONNA 310 S. OCEAN GRANDE DR. #104 PONTE VEDRA BEACH, FL 32082 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete GUZZO, DONNA Name: Name: Address: 310 S. OCEAN GRANDE DR. Address: City-St-Zip: PONTE VEDRA BEACH, FL 32082 US City-St-Zip: Title: () Delete Title: () Change () Addition BURNS, CATHLEEN Name: Name: Address: 2864 PELLICES RD. Address: City-St-Zip: ST. AUGUSTINE, FL 32092 City-St-Zip: Title: TREA () Delete Title: () Change () Addition REARDON, JOHN Name: Name: Address: 3560 C.R. 214 Address: City-St-Zip: ST. AUGUSTINE, FL 32092 US City-St-Zip: () Delete Title: SEC Title: () Change () Addition BRADDOCK, SARA Name: Name: 2104 WEST LYMINGTON WAY Address: Address: City-St-Zip: ST. AUGUSTINE, FL 32084 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: DONNA GUZZO P 06/04/2009