

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000010897

FILED  
Jun 01, 2010  
Secretary of State

Entity Name: FLAMINGO PTO, CORP.

**Current Principal Place of Business:**

1130 SW 133 AVE  
DAVIE, FL 333254110

**New Principal Place of Business:**

**Current Mailing Address:**

1130 SW 133 AVE  
DAVIE, FL 333254110

**New Mailing Address:**

FEI Number: 26-3742384

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FULLY, IVETTE  
12860 SW 8 CT.  
DAVIE, FL 33325 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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: WARREN, JESSICA  
Address: 425 E. ACRE DR.  
City-St-Zip: PLANTATION, FL 33317

Title: VP  
Name: VONTILZER, ANA  
Address: 12851 SW 17 PL  
City-St-Zip: DAVIE, FL 33325

Title: S  
Name: WHITSETT, VERONICA  
Address: 1071 SW 128 DR.  
City-St-Zip: DAVIE, FL 33325

Title: T  
Name: BYRNE, KERRY  
Address: 12821 SW 15 MNR  
City-St-Zip: DAVIE, FL 33325

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: IVETTE FULLY

P

06/01/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date