

ND90000000861

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(Requestor's Name)

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(Address)

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Amend/cc  
@ 9/23/09

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** PTO Sleepy Hill Elementary Corp.

**DOCUMENT NUMBER:** NO9000000861

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Kathleen M. Butler-Capo  
(Name of Contact Person)

Sleepy Hill Elementary PTO  
(Firm/ Company)

2558 Iris Ann Dr.  
(Address)

Lakeland, Florida 33810  
(City/ State and Zip Code)

KScapo@tampabay.rr.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kathleen M. Butler-Capo at (407) 902-5395  
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

☐ \$35 Filing Fee

☐ \$43.75 Filing Fee &  
Certificate of Status

☐ \$43.75 Filing Fee &  
Certified Copy  
(Additional copy is  
enclosed)

☒ \$52.50 Filing Fee  
Certificate of Status  
Certified Copy  
(Additional Copy  
is enclosed)

**Mailing Address**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
09 SEP 22 PM 3:19

Articles of Amendment  
to  
Articles of Incorporation  
of

PTO Sleepy Hill Elementary Corp.

(Name of Corporation as currently filed with the Florida Dept. of State)

N09000000861

(Document Number of Corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

**A. If amending name, enter the new name of the corporation:**

*The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.*

**B. Enter new principal office address, if applicable:**

(Principal office address **MUST BE A STREET ADDRESS**)

**C. Enter new mailing address, if applicable:**

(Mailing address **MAY BE A POST OFFICE BOX**)

**D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:**

Name of New Registered Agent:

New Registered Office Address:

(Florida street address)

\_\_\_\_\_, Florida \_\_\_\_\_  
(City) (Zip Code)

**New Registered Agent's Signature, if changing Registered Agent:**

*I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.*

\_\_\_\_\_  
Signature of New Registered Agent, if changing

**If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:**  
(Attach additional sheets, if necessary)

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>SEC</u>	<u>Pamella Weatherly</u>	<u>3720 Deborah Dr.</u> <u>Lakeland FL 33810</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>SEC</u>	<u>Angela Lawson</u>	<u>3410 Strobel Rd.</u> <u>Lakeland, FL 33810</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>Vice President</u>	<u>Lesa M. Kenney</u>	<u>3774 Rollingsford Cir.</u> <u>Lakeland, FL 33810</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove

**E. If amending or adding additional Articles, enter change(s) here:**  
(attach additional sheets, if necessary). (Be specific)

### Article III

- a. Said organization is organized exclusively for charitable, religious, educational, and scientific purposes, including, for such purposes, The making of distributions to organizations that qualify as exempt organizations under section 501(c)(3) of The Internal Revenue Code, or corresponding section of any future federal tax code.
- b. Upon The dissolution of The organization, assets shall be distributed for one or more exempt purposes within The meaning of section 501(c)(3) of The Internal Revenue Code, or corresponding section of any future federal tax code, or shall be distributed to The federal government, or to a state or local government, for a public purpose. Any such assets (see attachment)

Officer Amendments

Treasurer -	Jennifer Clawson	4216 Sunnyside Dr. Lakeland, FL 33810	remove
Teacher Representative -	Kristin Turner	37413 Phelps Rd. Zephyrhills, FL 33541	remove
Teacher Representative -	Maryellen Sichtertermann	2564 Iris Ann Dr. Lakeland, FL 33810	APRO
Volunteer Coordinator -	Lesa M. Kensey	3774 Rollingsford Cir. Lakeland, FL 33810	remove
public relations -	Angela Lawson	3410 Strobel Rd. Lakeland, FL 33810	Remove
Public relations -	Cari McCaulley	5557 Grey Hawk Ln. Lakeland, FL 33810	APRO

Section E page 2 continued.

not disposed of shall be disposed of by The Court of Common Pleas of The County in which The principal office of The organization is then located, exclusively for such purposes or to such organization or organizations, as said Court shall determine, which are organized and operated exclusively for such purposes.

The date of each amendment(s) adoption: 9-18-2009

Effective date if applicable: 9-18-2009 (date of adoption is required)  
(no more than 90 days after amendment file date)

**Adoption of Amendment(s) (CHECK ONE)**

☒ The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

☐ There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated 9-18-2009

Signature Kathleen M. Butler-Capo  
(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

KATHLEEN M. BUTLER-CAPO  
(Typed or printed name of person signing)

President  
(Title of person signing)