

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N09000006291

**FILED**  
**Feb 07, 2010**  
**Secretary of State**

**Entity Name:** ASTATULA ELEMENTARY SCHOOL PTO, INC.

**Current Principal Place of Business:**

13925 FLORIDA AVENUE  
ASTATULA, FL 34705

**New Principal Place of Business:**

**Current Mailing Address:**

13925 FLORIDA AVENUE  
ASTATULA, FL 34705

**New Mailing Address:**

**FEI Number:** 80-0411352

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

XIMANIES, RENEE  
13925 FLORIDA AVENUE  
ASTATULA, FL 34705 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:** PD  
**Name:** KIMPEL, SANDRA  
**Address:** 1303 REDWOOD COURT  
**City-St-Zip:** TAVARES, FL 32778

**Title:** VD  
**Name:** ROACH, JENNIFER  
**Address:** 16805 BEAUCLAIRE COURT  
**City-St-Zip:** TAVARES, FL 32778

**Title:** SD  
**Name:** BUCHAN, WENDY  
**Address:** 427 EAST KEY AVENUE  
**City-St-Zip:** EUSTIS, FL 32726

**Title:** TD  
**Name:** XIMANIES, RENEE  
**Address:** 29351 OLD MILL EAST  
**City-St-Zip:** TAVARES, FL 32778

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:** RENEE XIMANIES

TD

02/07/2010

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

\_\_\_\_\_  
Date