

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N09000006291

**FILED**  
**Jan 12, 2012**  
**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:**

KLINE, BONNIE  
13925 FLORIDA AVENUE  
ASTATULA, FL 34705 US

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

PROCTOR, BARBARA  
13925 FLORIDA AVENUE  
ASTATULA, FL 34705 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: BARBARA PROCTOR

01/12/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: HULBERT, SHAWNA  
Address: 17515 COUNTY ROAD 448  
City-St-Zip: MT. DORA, FL 32757

Title: VD  
Name: RUFRANO, KATHLEEN  
Address: 17747 EAST LAKE JEM ROAD  
City-St-Zip: MT. DORA, FL 32757

Title: SD  
Name: MCDONALD, BRANDY  
Address: 27910 TAMMI DRIVE  
City-St-Zip: TAVARES, FL 32778

Title: TD  
Name: PROCTOR, BARBARA  
Address: 17735 EAST LAKE JEM ROAD  
City-St-Zip: MT. DORA, FL 32757

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: BARBARA PROCTOR

TREA

01/12/2012

Electronic Signature of Signing Officer or Director

Date