

2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Aug 22, 2012
Secretary of State

DOCUMENT# N11000008724

Entity Name: IMAGINE SCHOOLS CHANCELLOR CAMPUS PTSA,INC.**Current Principal Place of Business:**3333 HIGH RIDGE ROAD
BOYNTON BEACH, FL 33426**New Principal Place of Business:****Current Mailing Address:**3333 HIGH RIDGE ROAD
BOYNTON BEACH, FL 33426**New Mailing Address:****FEI Number:** 32-0352065**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**LOVING, JACKLYN R
3333 HIGH RIDGE ROAD
BOYNTON BEACH, FL 33426 US**Name and Address of New Registered Agent:**PEPE, JENNIFER R
3333 HIGH RIDGE ROAD
BOYNTON BEACH, FL 33426 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: JENNIFER PEPE

08/22/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: STEPHAN, ELIZABETH
Address: 3333 HIGH RIDGE ROAD
City-St-Zip: BOYNTON BEACH, FL 33426 US

Title: VP
Name: SUTTERFIELD, GLENDA
Address: 3333 HIGH RIDGE ROAD
City-St-Zip: BOYNTON BEACH, FL 33426 US

Title: T
Name: PEPE, JENNIFER R
Address: 3333 HIGH RIDGE ROAD
City-St-Zip: BOYNTON BEACH, FL 33426 US

Title: S
Name: MEDEIROS, ADRIANNA
Address: 3333 HIGH RIDGE ROAD
City-St-Zip: BOYNTON BEACH, FL 33426 US

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: JENNIFER PEPE

T

08/22/2012

Electronic Signature of Signing Officer or Director

Date