

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N22100

FILED  
Jan 11, 2005  
Secretary of State

**Entity Name:** PARENT-TEACHERS ORGANIZATION OF BOB SIKES ELEMENTARY SCHOOL, INC.

**Current Principal Place of Business:**

WALTHALL, BETH  
425 ADAMS DRIVE  
CRESTVIEW, FL 32536 US

**New Principal Place of Business:**

425 ADAMS DRIVE  
CRESTVIEW, FL 32536 US

**Current Mailing Address:**

WALTHALL, BETH  
425 ADAMS DRIVE  
CRESTVIEW, FL 32536 US

**New Mailing Address:**

425 ADAMS DRIVE  
CRESTVIEW, FL 32536 US

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired ( )**

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

KUNKEL, PATRICIA  
425 ADAMS DR  
CRESTVIEW, FL 32536 US

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

ULRICH, PETER  
425 ADAMS DR  
CRESTVIEW, FL 32536 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: MR. PETER ULRICH

01/11/2005

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: SINGLETON, RICHARD  
Address: 6157 GARDEN CITY ROAD  
City-St-Zip: CRESTVIEW, FL 32539

Title: DV ( ) Delete  
Name: KOSKY, KATHIE  
Address: 124 TWIN OAK DR  
City-St-Zip: CRESTVIEW, FL 32536

Title: DT ( ) Delete  
Name: MOODY, ROBBIN  
Address: 125 JACOB DR.  
City-St-Zip: CRESTVIEW, FL 32536

Title: DS ( ) Delete  
Name: FISH, SHERRI  
Address: 111 MOHAWK TR.  
City-St-Zip: CRESTVIEW, FL 32536

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DP (X) Change ( ) Addition  
Name: MITCHELL, JEAN  
Address: 723 ADAMS DRIVE  
City-St-Zip: CRESTVIEW, FL 32536

Title: DV (X) Change ( ) Addition  
Name: FISH, SHERRI  
Address: 111 MOHAWK TR.  
City-St-Zip: CRESTVIEW, FL 32536

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: DS (X) Change ( ) Addition  
Name: PETERS, DONNA  
Address: 2505 SUNSET  
City-St-Zip: CRESTVIEW, FL 32536

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: DR. J. JEAN MITCHELL

DP

01/11/2005

Electronic Signature of Signing Officer or Director

Date