

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N37991

FILED
Sep 18, 2009
Secretary of State

Entity Name: MAXIMO ELEMENTARY PTA, INC.

Current Principal Place of Business:

% MAXIMO ELEMENTARY SCHOOL
4850 31ST ST S
ST. PETERSBURG, FL 33712

New Principal Place of Business:

Current Mailing Address:

% MAXIMO ELEMENTARY SCHOOL
4850 31ST ST S
ST. PETERSBURG, FL 33712

New Mailing Address:

FEI Number: 59-1977737 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

BROWN, SEYMOUR M
4850 31ST STREET SOUTH
ST. PETERSBURG, FL 33712 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PT () Delete
Name: MACON, BRANDIE
Address: 4850 31ST ST S
City-St-Zip: SAINT PETERSBURG, FL 33712

Title: TD () Delete
Name: MACON, BRIAN
Address: 4850 31ST SOUTH
City-St-Zip: SAINT PETERSBURG, FL 33712

Title: VPD () Delete
Name: YOLANDA, SIMMONS
Address: 4850 31ST SOUTH
City-St-Zip: SAINT PETERSBURG, FL 33712

Title: T () Delete
Name: MYERS, STACY
Address: 4850 31ST SOUTH
City-St-Zip: SAINT PETERSBURG, FL 33712

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: BRANDIE MACON

PT

09/18/2009

Electronic Signature of Signing Officer or Director

Date