

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N41320

FILED
Feb 24, 2009
Secretary of State

Entity Name: BRANDON ACADEMY PTO, INC.

Current Principal Place of Business:

801 LIMONA ROAD
BRANDON, FL 335102830

New Principal Place of Business:

Current Mailing Address:

801 LIMONA ROAD
BRANDON, FL 335102830

New Mailing Address:

FEI Number: 59-3044653

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRANDON ACADEMY
801 LIMONA RD
FORT LAUDERDALE, FL 33311 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: DP () Delete
Name: AYRES, MICHELLE
Address: 5620 ROCKFIELD LOOP
City-St-Zip: VALRICO, FL 33594

Title: VP () Delete
Name: KAZBOUR, LIZ
Address: 1119 HUNT CLUB LANE
City-St-Zip: VALRICO, FL 33594

Title: TD () Delete
Name: GONZALEA, LISA
Address: 6309 WILD ORCHID DR
City-St-Zip: LITHIA, FL 33547

Title: SD () Delete
Name: SOLIIN, LAURA
Address: 9733 BAY COLONY DR
City-St-Zip: RIVERVIEW, FL 33569

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: LISA M. GONZALEZ

TRE

02/24/2009

Electronic Signature of Signing Officer or Director

Date