


FILE NOW: FILING FEE IS \$61.25

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May 21 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. McRae Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N45602** (2)

COLUMBIA ELEMENTARY SCHOOL PTA INC.



Principal Place of Business 650 COLUMBIA SCHOOL RD ORLANDO FL 32833	Mailing Address 650 COLUMBIA SCHOOL RD ORLANDO FL 32833
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2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24	Country 25
Zip 29	Country 30

3. Date Incorporated or Qualified 10/14/1991
4. FEI Number 23-7106547
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input type="checkbox"/> No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

9. Name and Address of Current Registered Agent BOYD, SYLVIA 650 COLUMBIA SCHOOL RD ORLANDO FL 32833
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10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE Sharon Veres DATE 4/23/98

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	V.P. <u>Vice President</u>
NAME	GODERIS, DEBBIE	1.2 NAME	COATS, DIANNA
STREET ADDRESS	20406 MAXIM PKWY	1.3 STREET ADDRESS	1505 S. TANNER RD
CITY-ST-ZIP	ORLANDO FL	1.4 CITY-ST-ZIP	ORLANDO FLA. 32833
TITLE	V	2.1 TITLE	P. <u>Pam Luther President</u>
NAME	WAGNER, LINDA	2.2 NAME	2690 Babbitt Ave
STREET ADDRESS	3036 S TANNER RD	2.3 STREET ADDRESS	Orlando, FL 32833
CITY-ST-ZIP	ORLANDO FL	2.4 CITY-ST-ZIP	
TITLE	T	3.1 TITLE	<u>Treasurer</u>
NAME	VERES, SHARON	3.2 NAME	<u>Same</u>
STREET ADDRESS	17110 DRAWDY CT	3.3 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL	3.4 CITY-ST-ZIP	
TITLE	SD	4.1 TITLE	<u>Sandy Coats</u>
NAME	LAPE, DERON	4.2 NAME	<u>2843 Abney Ave.</u>
STREET ADDRESS	1516 10TH STREET	4.3 STREET ADDRESS	<u>Orlando, FL 32833</u>
CITY-ST-ZIP	ORLANDO FL	4.4 CITY-ST-ZIP	
TITLE	DVR	5.1 TITLE	<u>Mrs. Marlene Jackson</u>
NAME	BOYD, SYLVIA	5.2 NAME	<u>650 Columbia School Rd</u>
STREET ADDRESS	650 COLUMBIA SCHOOL RD	5.3 STREET ADDRESS	<u>Orlando, FL 32833</u>
CITY-ST-ZIP	ORLANDO FL 32833	5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE Sharon Veres DATE 4/23/98

CR2E037 (10/97)