



# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 04, 2008 8:00 am**  
**Secretary of State**

04-04-2008 90035 028 \*\*\*\*70.00

<b>DOCUMENT # N45602</b> 1. Entity Name COLUMBIA ELEMENTARY SCHOOL PTA <del>INC</del>					
Principal Place of Business 650 COLUMBIA SCHOOL RD ORLANDO, FL 32833				Mailing Address 18501 CYPRESS LAKE GLENN BLVD ORLANDO, FL 32820	
2. Principal Place of Business - No P.O. Box # 18501 Cypress Glenn Blvd.		3. Mailing Address 18501 Cypress Glenn Blvd.			
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 		03192008 Chg-NP CR2E037 (12/06)	
City & State Orlando FL		City & State Orlando FL		4. FEI Number 23-7106547	
Zip 32820		Country USA		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent  FINKELSTEIN, KAREN 650 COLUMBIA SCHOOL ROAD ORLANDO, FL 32833				7. Name and Address of New Registered Agent  Name Street Address (P.O. Box Number is Not Acceptable) 18501 Cypress Glenn Blvd City Orlando FL Zip Code 32820	
8. 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. I am familiar with, and accept the obligations of registered agent.  SIGNATURE <u>Karen Finkelstein</u> DATE <u>3/24/08</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
<b>Filing Fee is \$61.25</b> <b>Due by May 1, 2008</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
<b>Make check payable to Florida Department of State</b>					
<b>10. OFFICERS AND DIRECTORS</b>					
TITLE	VD WILLEKE, ANGELA 18501 CYPRESS LAKE GLENN BLVD ORLANDO, FL 32820	<input type="checkbox"/> Delete			
NAME	18501 CYPRESS LAKE GLENN BLVD				
STREET ADDRESS	ORLANDO, FL 32820				
CITY-ST-ZIP					
TITLE	SD LYONS, DENISE 18501 CYPRESS LAKE GLENN BLVD ORLANDO, FL 32820	<input checked="" type="checkbox"/> Delete			
NAME	18501 CYPRESS LAKE GLENN BLVD				
STREET ADDRESS	ORLANDO, FL 32820				
CITY-ST-ZIP					
TITLE	TD NORTH, MONICA 18501 CYPRESS LAKE GLENN BLVD ORLANDO, FL 32820	<input checked="" type="checkbox"/> Delete			
NAME	18501 CYPRESS LAKE GLENN BLVD				
STREET ADDRESS	ORLANDO, FL 32820				
CITY-ST-ZIP					
TITLE	D FINKELSTEIN, KAREN 18501 CYPRESS LAKE GLENN BLVD ORLANDO, FL 32820	<input type="checkbox"/> Delete			
NAME	18501 CYPRESS LAKE GLENN BLVD				
STREET ADDRESS	ORLANDO, FL 32820				
CITY-ST-ZIP					
TITLE	PD INNIS, TRACY 18501 CYPRESS LAKE GLENN BLVD ORLANDO, FL 32820	<input checked="" type="checkbox"/> Delete			
NAME	18501 CYPRESS LAKE GLENN BLVD				
STREET ADDRESS	ORLANDO, FL 32820				
CITY-ST-ZIP					
TITLE	VD DERA, LORI 18501 CYPRESS LAKE GLENN BLVD ORLANDO, FL 32820	<input checked="" type="checkbox"/> Delete			
NAME	18501 CYPRESS LAKE GLENN BLVD				
STREET ADDRESS	ORLANDO, FL 32820				
CITY-ST-ZIP					
<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>					
TITLE	P Willeke Angela 18501 Cypress Lake Glenn Blvd. Orlando, FL 32820	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME	18501 Cypress Lake Glenn Blvd.				
STREET ADDRESS	Orlando, FL 32820				
CITY-ST-ZIP					
TITLE	V Ebert-Jones, Jennifer 18501 Cypress Lake Glenn Blvd Orlando, FL 32820	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition			
NAME	18501 Cypress Lake Glenn Blvd				
STREET ADDRESS	Orlando, FL 32820				
CITY-ST-ZIP					
TITLE	V McCulley, Carolyn 18501 Cypress Lake Glenn Blvd. Orlando, FL 32820	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition			
NAME	18501 Cypress Lake Glenn Blvd.				
STREET ADDRESS	Orlando, FL 32820				
CITY-ST-ZIP					
TITLE	S Tomlinson, Reina 18501 Cypress Lake Glenn Blvd. Orlando, FL 32820	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition			
NAME	18501 Cypress Lake Glenn Blvd.				
STREET ADDRESS	Orlando, FL 32820				
CITY-ST-ZIP					
TITLE	T Holley, Aimée 18501 Cypress Lake Glenn Blvd. Orlando, FL 32820	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition			
NAME	18501 Cypress Lake Glenn Blvd.				
STREET ADDRESS	Orlando, FL 32820				
CITY-ST-ZIP					
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>Aimée Holley</u> <u>Aimée Holley</u> <u>03-19-08</u> <u>407-568-3556</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					