

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 18, 2005 8:00 am
Secretary of State

07-18-2005 90043 028 ****70.00

DOCUMENT # N45834 1. Entity Name PARENT TEACHER ORGANIZATION OF P.H.M.A. INC.			
Principal Place of Business 2313 NEBRASKA AVE. PALM HARBOR, FL 34683		Mailing Address 2313 NEBRASKA AVE. PALM HARBOR, FL 34683	
2. Principal Place of Business 2355 Nebraska Ave.		3. Mailing Address 2355 Nebraska Ave.	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Palm Harbor FL		City & State Palm Harbor FL	
Zip 34683		Zip 34683	
Country USA		Country USA	
4. FEI Number 59-3092024		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent NAUERT, JODELL 2313 NEBRASKA AVE PALM HARBOR, FL 34683		7. Name and Address of New Registered Agent Name Cheryl A. Wright-Morales Street Address (P.O. Box Number is Not Acceptable) 2355 Nebraska Avenue City Palm Harbor FL Zip Code 34683	
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><i>Cheryl A. Wright-Morales (treasurer)</i></u> 7-11-05 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>			
Filing Fee is \$61.25 Due by September 7, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
Make check payable to Florida Department of State			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P PAGEN HAROT, KARI 2313 NEBRASKA AVE. PALM HARBOR, FL 34683	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition PRESIDENT KARI PAGENHARDT 2355 Nebraska Ave Palm Harbor, FL 34683
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T WRIGHT, CHERYL 2313 NEBRASKA AVE. PALM HARBOR, FL 34683	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition CHERYL WRIGHT-MORALES 2355 Nebraska Ave Palm Harbor, FL 34683
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV FABIAN, ARDILA 2313 NEBRASKA AVENUE PALM HARBOR, FL 34683	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition VICE PRESIDENT FRANK PENSABENE 2355 Nebraska Ave Palm Harbor, FL 34683
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CS LORD-SHELBY, JILL 2313 NEBRASKA AVE. PALM HARBOR, FL 34683	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition ASST. TREASURER JENNIFER ALLEBACH 2355 Nebraska Ave Palm Harbor, FL 34683
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Volunteer Coordinator SARAH ARDILA 2355 Nebraska Ave Palm Harbor, FL 34683
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. 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 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><i>Cheryl A. Wright-Morales</i></u>		Date 7/11/05 Daytime Phone # 727-787-7996	

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