

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N47391

FILED
Feb 06, 2011
Secretary of State

Entity Name: LAKE PARK PARENT TEACHER ORGANIZATION, INC.

Current Principal Place of Business:

1295 14TH AVENUE N.
NAPLES, FL 34102 US

New Principal Place of Business:

Current Mailing Address:

1295 14TH AVENUE N.
NAPLES, FL 34102 US

New Mailing Address:

FEI Number: 65-0324048

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

NEWMAN, KAREN
2800 CRAYTON ROAD
NAPLES, FL 34103 US

Name and Address of New Registered Agent:

CRAIG, ERICKA
1220 11TH ST N
NAPLES, FL 34102 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: ERICKA E CRAIG

02/06/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: WILLIAMS, GINNY
Address: P.O. BOX 2195
City-St-Zip: NAPLES, FL 34106 US

Title: VPD
Name: NOCERA, RHONDA
Address: 1053 14TH AVE N
City-St-Zip: NAPLES, FL 34102 US

Title: TD
Name: CRAIG, ERICKA
Address: 1220 11TH ST N
City-St-Zip: NAPLES, FL 34102 US

Title: SD
Name: BLACK, KIM
Address: 895 11TH ST N
City-St-Zip: NAPLES, FL 34102 US

I hereby 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 all other like empowered.

SIGNATURE: ERICKA E CRAIG

TD

02/06/2011

Electronic Signature of Signing Officer or Director

Date