# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Feb 02, 2005**
**Secretary of State**

DOCUMENT# N95000004396

**Entity Name:** HAWKS RISE ELEMENTARY SCHOOL PARENT TEACHER ORGAINZATION, INC.

**Current Principal Place of Business:**

205 MEADOW RIDGE DRIVE
TALLAHASSEE, FL 32312

**New Principal Place of Business:**

**Current Mailing Address:**

205 MEADOW RIDGE DRIVE
TALLAHASSEE, FL 32312

**New Mailing Address:**

**FEI Number: 82-0554538** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

FRYE, SONJA S
6421 MALLARD TRACE DRIVE
TALLAHASSEE, FL 32312 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: PD ( ) Delete
Name: FRYE, SONJA S
Address: 6421 MALLARD TRACE DRIVE
City-St-Zip: TALLAHASSEE, FL 32312

Title: TD ( ) Delete
Name: BERTOT, ROBIN E
Address: 6344 GLASGOW DRIVE
City-St-Zip: TALLAHASSEE, FL 32312

Title: VPD ( ) Delete
Name: WILLIAMS, KELLEY
Address: 6313 PICKNEY HILL ROAD
City-St-Zip: TALLAHASSEE, FL 32312

Title: SD ( ) Delete
Name: WALTER, ALEXIS
Address: 1307 CONSERVANCY DRIVE EAST
City-St-Zip: TALLAHASSEE, FL 32312

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: VPD (X) Change ( ) Addition
Name: HARTLINE, MARSHA
Address: 1332 CONSERVANCY DRIVE EAST
City-St-Zip: TALLAHASSEE, FL 32312

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: SONJA S. FRYE PD 02/02/2005

Electronic Signature of Signing Officer or Director — Date