

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000005936

FILED
Feb 21, 2004
Secretary of State**Entity Name:** PERRINE ELEMENTARY P.T.A., INC.**Current Principal Place of Business:**8851 SW168TH STREET
MIAMI, FL 33157**New Principal Place of Business:****Current Mailing Address:**8851 S.W. 168TH ST
MIAMI, FL 33157**New Mailing Address:**8851 SW 168TH ST
MIAMI, FL 33157**FEI Number:** 23-7628565**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**ABERCROMBIE, WRAY
16115 SW 117TH AVENUE
25
MIAMI, FL 33177 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: VPD () Delete
Name: AUSTIN, DOUG
Address: 8865 SW 183RD TERRACE
City-St-Zip: MIAMI, FL 33157

Title: VPD () Delete
Name: FLORES, DAISY
Address: 18123 SW 87 PL.
City-St-Zip: MIAMI, FL 33157

Title: TD () Delete
Name: ABERCROMBIE, WRAY
Address: 17431 SW 93 AVENUE
City-St-Zip: MIAMI, FL 33157

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VPD (X) Change () Addition
Name: JOHNSON, MIKE
Address: 17700 SW 84TH COURT
City-St-Zip: MIAMI, FL 33157

Title: PD (X) Change () Addition
Name: ABERCROMBIE, WRAY
Address: 17431 SW 93 AVENUE
City-St-Zip: MIAMI, FL 33157

Title: TD () Change (X) Addition
Name: HAPPELL, KATHLEEN
Address: 8805 SW 178TH TERRACE
City-St-Zip: MIAMI, FL 33157

Title: SD () Change (X) Addition
Name: DIAZ, MERCY
Address: 8592 SW 169TH TERRACE
City-St-Zip: MIAMI, FL 33157

Title: SD () Change (X) Addition
Name: OGDEN, CAROL
Address: 9200 SW 166TH STREET
City-St-Zip: MIAMI, FL 33157

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: WRAY ABERCROMBIE

PD

02/21/2004

Electronic Signature of Signing Officer or Director

Date