

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000005271

FILED
Jan 14, 2010
Secretary of State

Entity Name: VILLAGE PINES SCHOOL PARENT TEACHER ORGANIZATION, INC.

Current Principal Place of Business:

15000 S.W. 92ND AVE.
MIAMI, FL 33176

New Principal Place of Business:

Current Mailing Address:

15000 S.W. 92ND AVE.
MIAMI, FL 33176

New Mailing Address:

FEI Number: 65-0792477

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ALMAGUER, ANGEL
15000 SOUTHWEST 92ND AVENUE
MIAMI, FL 33176 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: P
Name: ALMAGUER, ANGEL
Address: 15000 S.W. 92ND AVE.
City-St-Zip: MIAMI, FL 33176

Title: D
Name: FRAZIER, LUCILLE
Address: 15000 S.W. 92ND AVE.
City-St-Zip: MIAMI, FL 33176

Title: V
Name: FUENTES, MEGAN
Address: 15000 SOUTHWEST 92ND AVENUE
City-St-Zip: MIAMI, FL 33176

Title: T
Name: KAUFMAN, ALANA
Address: 15000 SOUTHWEST 92ND AVENUE
City-St-Zip: MIAMI, FL 33176

Title: V
Name: KAUFMAN, KEVIN
Address: 15000 SOUTHWEST 92ND AVENUE
City-St-Zip: MIAMI, FL 33176

Title: S
Name: HERNANDEZ, MAYRA
Address: 15000 SOUTHWEST 92ND AVENUE
City-St-Zip: MIAMI, FL 33176

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: ALANA KAUFMAN

T

01/14/2010

Electronic Signature of Signing Officer or Director

Date