2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000005546

FILED Jan 26, 2007 Secretary of State

Entity Name: LAKE FORREST PREPARATORY PARENT TEACHERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

866 LAKE HOWELL RD MAITLAND, FL 32751 US

Current Mailing Address: New Mailing Address:

866 LAKE HOWELL RD MAITLAND, FL 32751 US

FEI Number: 59-3425237 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

ALLEN, DONNA VAN BARTOS, STACEY 700 SANDSPUR ROAD 410 ALMERIA CT WINTER SPRINGS, FL 32708 US US MAITLAND, FL 32751

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: STACEY BARTOS 01/26/2007

> Electronic Signature of Registered Agent Date

> > City-St-Zip:

OFFICERS AND DIRECTORS:

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

ALTAMONTE SPRINGS, FL 32701

() Delete (X) Change () Addition KEMP, ANN-MARIE HAMMOND, KIM Name: Name:

906 VERSAILLES CIRCLE Address: 2307 FIELDINGWOOD RD Address: City-St-Zip: MAITLAND, FL 32751 City-St-Zip: MAITLAND, FL 32751

Title: VPD () Delete Title: (X) Change () Addition POLINER, LARRY Name: POLINER, LARRY Name:

Address: 617 ARVEN DRIVE Address: 617 ARVERN DRIVE ALTAMONTE SPRINGS, FL 32701

Title: VPD () Delete Title: FD (X) Change () Addition JOHNSON, TRACY MERCER, RUSSELL Name: Name:

342 OAK PARK PLACE 570 E GEORGE AVE Address: Address: City-St-Zip: CASSELBERRY, FL 32707 City-St-Zip: MAITLAND, FL 32751

() Delete Title: TD Title: (X) Change () Addition

NEISWANDER, JENNIFER H Name: Name: SIGMAN, LISA 1137 KERWOOD CIRCLE 2182 PARK MAITLAND CT Address: Address: City-St-Zip: OVIEDO, FL 32765 City-St-Zip: MAITLAND, FL 32751

Title: SD () Delete Title: (X) Change () Addition

HUFF, STEPHANIE BARTOS, STACEY Name: Name: 700 SANDSPUR ROAD 2882 WILLOW BAY TERRACE Address: Address: City-St-Zip: CASSELBERRY, FL 32707 City-St-Zip: MAITLAND, FL 32751

Title: () Delete Title: () Change (X) Addition

VAN ALLEN, DONNA Name: Name: 410 ALMERIA CT Address: Address:

WINTER SPRINGS, FL 32708 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: STACEY BARTOS F 01/26/2007