

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000001026

FILED
May 03, 2007
Secretary of State

Entity Name: BAK MIDDLE SCHOOL OF THE ARTS PTO, INC.

Current Principal Place of Business:

1725 ECHO LAKE DR
WEST PALM BEACH, FL 33407

New Principal Place of Business:

Current Mailing Address:

1725 ECHO LAKE DR
WEST PALM BEACH, FL 33407

New Mailing Address:

FEI Number: 65-0828975 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

PERLMAN, ELIZABETH
1725 ECHO LAKE DR
WEST PALM BEACH, FL 33407 US

Name and Address of New Registered Agent:

KENNEDY, ELIZABETH
1725 ECHO LAKE DR
WEST PALM BEACH, FL 33407 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: ELIZABETH KENNEDY

05/03/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CP () Delete
Name: DALTON, LINDA
Address: 1725 ECHO LAKE DR
City-St-Zip: WEST PALM BEACH, FL 33407

Title: CP () Delete
Name: ZINNES, MELANIE
Address: 1725 ECHO LAKE DR
City-St-Zip: WEST PALM BEACH, FL 33407

Title: CV () Delete
Name: IRWIN, TAMMY
Address: 1725 ECHO LAKE DR
City-St-Zip: WEST PALM BEACH, FL 33407

Title: CV () Delete
Name: WILCOX, CINDY
Address: 1725 ECHO LAKE DR
City-St-Zip: WEST PALM BEACH, FL 33407

Title: T () Delete
Name: HALTY, PAT
Address: 1725 ECHO LAKE DR
City-St-Zip: WEST PALM BEACH, FL 33407

Title: S () Delete
Name: FIELDS, TAMMY
Address: 1725 ECHO LAKE DR
City-St-Zip: WEST PALM BEACH, FL 33407

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify 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: PAT HALTY

T

05/03/2007

Electronic Signature of Signing Officer or Director

Date