

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 10, 2007 8:00 am
Secretary of State

09-10-2007 90001 037 ****61.25

DOCUMENT # N98000003557

1. Entity Name
**PINEWOODS ELEMENTARY SCHOOL
PARENT/TEACHER ORGANIZATION, INC.**



Principal Place of Business
**11900 STONEYBROOK GOLF DR
ESTERO, FL 33928**

Mailing Address
**11900 STONEYBROOK GOLF DR
ESTERO, FL 33928**



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

08292007 Chg-NP CR2E037 (12/06)

4. FEI Number
65-0791048

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**SHENKO, WILLIAM E JR
2801 ESTERO BOULEVARD, SUITE C
FORT MYERS BEACH, FL 33931**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by September 14, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Delete
NAME WARD, SUZANNE
STREET ADDRESS 18072 HORSESHOE BAY CIR.
CITY-ST-ZIP FORT MYERS, FL 33912

TITLE PD ☒ Change ☐ Additio
NAME MacPherson, Heather
STREET ADDRESS 9289 Oak Bridge Ct.
CITY-ST-ZIP Ft. Myers, FL 33967

TITLE VPD ☐ Delete
NAME BLACK, TAMI
STREET ADDRESS 17543 TAYLOR DR
CITY-ST-ZIP FORT MYERS, FL 33908

TITLE VPD ☒ Change ☐ Additio
NAME Keegan, Marybeth
STREET ADDRESS 21253 Waymouth Run
CITY-ST-ZIP Estero, FL 33928

TITLE T ☐ Delete
NAME RODRIGUEZ, TONI L
STREET ADDRESS 23430 OLDE MEADOWBROOK CIRCLE
CITY-ST-ZIP BONITA SPRINGS, FL 34134

TITLE T ☒ Change ☐ Additio
NAME Sorensen, Dorothy
STREET ADDRESS 13201 Lazzaro Ct.
CITY-ST-ZIP Estero, FL 33928

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Additio
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Additio
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Additio
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature]

9.6.07

29.495.9117