2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT DOCUMENT # N98000004890 1. Entity Name PINELLAS PARENT EDUCATORS ASSOCIATION, INC.

FILED
Apr 13, 2007 8:00 am
Secretary of State

04-13-2007 90176 003 ****70 00

PINELLA	S PARENT EDUCATORS AS	SSOCIATION, INC.				04-13-200)/ 901/6	003	70.00	
630 KIRKWO	ce of Business OOD TERR. N. RSBURG, FL 33701	Mailing Address P.O. BOX 60685 SAINT PETERSBURG, FL	33784-0685			CONTINUE CONTRACTOR	ili 48 in 68 in 8	TO: FOIL SAID OT	XIII	
2. Principal Place of Business - No P.O. Box # 3. M.		3. Mailing Address	Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.			02152007	Chg-NP	CR2E0	37 (12/06)		
City & Stat	te	City & State			4. FEI Number 59-3529	814			oplied For ot Applicable	
Zip	Country	Zip 	Country	į		Status Desired	×	\$8.75 Add Fee Require		
	6. Name and Address of Current F	legistered Agent	Name		7. Name and A	ddress of New i	Registered .	Agent		
GIBBS ŁAW FIRM. P.A										
5666 SEMINOLE BLVD, STE 2 SEMINOLE, FL 33772			Street A	Address (F	P.O. Box Number	is Not Acceptabl	le) 			
			City				FL	Zip Cod	e	
	e named entity submits this statement for tions of registered agent.	the purpose of changing its re	egistered office o	or register	ed agent, or both	, in the State of Fl	lorida. I am	familiar with,	and accept	
,	-									
SIGNATURE	Signature, typed or printed name of registered agent a	nd title if applicable. (NOTE:	Registered Agent signa	beniupen anut	when reinstating)		DATE			
Filing Fee is \$61.25 Due by May 1, 2007			9. Election Campaign Financing Trust Fund Contribution.			\$5.00 May Be Added to Fees Make check payable to Florida Department of State				
					\$5.00 May Be Added to Fees	Flo				
10.	Due by May 1, 2007 OFFICERS AND DIR	Trust Fund Co		<u> </u>	\$5.00 May Be Added to Fees	Flo	rida Depai	tment of S	tate	
MLE	OFFICERS AND DIR	Trust Fund Co	11. THE	LJ A	Added to Fees	NGES TO OFFICE	rida Depai	tment of S	tate	
	Due by May 1, 2007 OFFICERS AND DIR	Trust Fund Co	ontribution.	D Cot:	Added to Fees DDITIONS/CHAI DUTH, Sand T Castile (NGES TO OFFICE	rida Depar ERS AND DI	RECTORS IN	tate	
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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 ceth; 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: 7

C15 ty Myrick 4/10/07 727-343-234

ER OR DIRECTOR

Date

Descripte Profile #