

**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 30, 2007 08:00 A
Secretary of State

DOCUMENT # N99000003070

1. Entity Name
**THE POLICE ATHLETIC LEAGUE AND CHARTER
SCHOOLS OF MANATEE COUNTY, INC.**



Principal Place of Business
**202 13TH AVENUE EAST
BRADENTON, FL 34208**

Mailing Address
**202 13TH AVENUE EAST
BRADENTON, FL 34208**



04172007 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3597540	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**ROBINSON, LAYON
442 OLD MAIN STREET
BRADENTON, FL 34205**

**DO NOT WRITE
IN THIS SPACE**

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 reissuing)

DATE

19th April 2007

**Filing Fee is \$81.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PRESHA, WALTER P.O. BOX 106 PARRISH, FL 34219
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LOWE, GARY 1115 10TH ST. W PALMETTO, FL 34221
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MILLS, VIRGIL 3304 7TH ST CIR W PALMETTO, FL 34221
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V ROBINSON, LAYON 442 OLD MAIN STREET BRADENTON, FL 34205
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MILLER, JOE 312 69TH ST NW BRADENTON, FL 34209
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WELLS, CHARLES 515 11TH STREET WEST BRADENTON, FL 34205

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05/17/07-80044-015 61.25

**DO NOT WRITE
IN THIS SPACE**

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

19th April 2007