## 2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000002491

Entity Name: NORTH NAPLES MIDDLE SCHOOL PTO, INC.

**FILED** Mar 27, 2016 **Secretary of State** CC7141615298

Date

Date

## **Current Principal Place of Business:**

16165 LEARNING LANE NAPLES, FL 34110

## **Current Mailing Address:**

16165 LEARNING LANE NAPLES, FL 34110 US

FEI Number: 20-1495100 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

OWENS, MONIQUE N 16165 LEARNING LANE NAPLES, FL 34110 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: MONIQUE OWENS 03/27/2016

Electronic Signature of Registered Agent

Officer/Director Detail:

Title Title VΡ

OWENS, MONIQUE N Name CLARK, DAVINA Name

Address 16165 LEARNING LANE Address 16165 LEARNING LANE City-State-Zip: NAPLES FL 34110

NAPLES FL 34110 City-State-Zip:

Title **SECRETARY** Title CORRESPONDING SECRETARY

Name POPPER, CHARISSA Name SLAVEN, RACHEL Address 16165 LEARNING LANE Address 16165 LEARNING LANE NAPLES FL 34110 City-State-Zip: City-State-Zip: NAPLES FL 34110

Title **PRESIDENT** Title **DIRECTOR** Name HEDRICH, JEN ANDERSON, MARTHA Name

Address 16165 LEARNING LANE 16165 LEARNING LANE Address City-State-Zip: NAPLES FL 34110 City-State-Zip: NAPLES FL 34110

I hereby 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 all other like empowered.

03/27/2016 SIGNATURE: MONIQUE OWENS TREASURER