2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000002568

Entity Name: LIBERTY PINES ACADEMY PARENT TEACHER ORGANIZATION,

INC.

FILED Feb 15, 2013 Secretary of State CC4536076904

Current Principal Place of Business:

10901 RUSSELL SAMPSON RD. ST. JOHNS, FL 32259

Current Mailing Address:

10901 RUSSELL SAMPSON RD. ST. JOHNS, FL 32259 US

FEI Number: 26-2205326 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BOWKER, JANINE 1188 EAGLE POINT DRIVE ST. AUGUSTINE, FL 32092 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: JANINE BOWKER 02/15/2013

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title VP Title PRESIDENT

Name ARCHER, ERIN Name RICHTER, CATHERINE

Address GLENFIELD CROSSING Address 1188 STONEHEDGE TRAIL LN

City-State-Zip: ST. AUGUSTINE FL 32092 City-State-Zip: ST. AUGUSTINE FL 32092

Title TREA Title SECR

Name BOWKER, JANINE Name GOULDEN, ERIN

Address 1188 EAGLE POINT DRIVE Address EAGLE POINT DRIVE

City-State-Zip: ST. AUGUSTINE FL 32092 City-State-Zip: ST. AUGUSTINE FL 32092

Title VP

Name DELANEY, KIMBERLY
Address 341 ST JOHNS GOLF DR

City-State-Zip: ST. AUGUSTINE FL 32092

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.

TREASURER

SIGNATURE: JANINE BOWKER

Electronic Signature of Signing Officer/Director Detail

02/15/2013