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.					
SIGNATURE: CHRISTINA ECKER	PRESIDENT	04/14/2016			

SIGNATURE: CHRISTINA ECKER

Electronic Signature of Signing Officer/Director Detail

Name and Address of Current Registered Agent:

ECKER, CHRISTINA 1000 WELLINGTON TRACE WELLINGTON, FL 33411 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	ECKER CHRISTINA			04/14/2016	
	Electronic Signature of Registered Agent			Date	
Officer/Director Detail :					
Title	P	Title	Т		
Name	ECKER, CHRISTINA	Name	KLOSTERMEYER, SHERI		
Address	1000 WELLINGTON TRACE	Address	1000 WELLINGTON TRACE		
City-State-Zip:	WELLINGTON FL 33411	City-State-Zip:	WELLINGTON FL 33411		
Title	V	Title	S		
Name	HOGE, ALINA	Name	KLOSTERMEYER, ROB		
Address	1000 WELLINGTON TRACE	Address	1000 WELLINGTON TRACE		
City-State-Zip:	WELLINGTON FL 33414	City-State-Zip:	WELLINGTON FL 33414		

2016 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL **REPORT**

DOCUMENT# N1400009246

Entity Name: EAGLE ARTS ACADEMY PARENT TEACHER ORGANIZATION (PTO) INC.

Current Principal Place of Business:

1000 WELLINGTON TRACE WELLINGTON, FL 33411

Current Mailing Address:

1000 WELLINGTON TRACE WELLINGTON, FL 33411

FEI Number: 47-2018323

Certificate of Status Desired: No

FILED Apr 14, 2016 Secretary of State CC2698759154

Date