

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 18, 2006 8:00 am
Secretary of State

08-18-2006 90078 004 ****61.25

DOCUMENT # N01000003267
 1. Entity Name
 PUC / AUP ALUMNI ASSOCIATION, USA, INC.



Principal Place of Business: 16140 KENNY ROAD, LAUREL, MD 20707
 Mailing Address: 16140 KENNY ROAD, LAUREL, MD 20707

50025552



2. Principal Place of Business: Suite, Apt. #, etc. City & State Zip Country
 3. Mailing Address: Suite, Apt. #, etc. City & State Zip Country

08072006 Chg-NP CR2E037 (4/06)

4. FEI Number: 59-3722185 Applied For: Not Applicable

5. Certificate of Status Desired: \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 LIWAG, MELCHOR R
 202 BEDFORD RD.
 ALTAMONTE SPRINGS, FL 32714

7. Name and Address of New Registered Agent
 Name: Chen, M.D., Delma Q.
 Street Address (P.O. Box Number is Not Acceptable): 1401 W. Silver Oak Dr.
 City: Avon Park FL Zip Code: 33825

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: Delma A. Q. Chen MD (NOTE: Registered Agent signature required when reinstating) DELMA A. Q. CHEN 8/9/2006 DATE

Filing Fee is \$61.25 Due by September 6, 2006

9. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS	
TITLE: DP NAME: VILLANUEVA, JEDIDIA STREET ADDRESS: 1751 MILL PLAIN RD CITY-ST-ZIP: FAIRFIELD, CT 06430	<input type="checkbox"/> Delete
TITLE: DV NAME: RODA, ALVA STREET ADDRESS: 3400 BITTERWOOD PL # 101 CITY-ST-ZIP: LAUREL, MD 20724	<input type="checkbox"/> Delete
TITLE: RA NAME: LIWAG, MELCHOR R STREET ADDRESS: 202 BEDFORD RD. CITY-ST-ZIP: ALTAMONTE SPRINGS, FL 32714	<input checked="" type="checkbox"/> Delete
TITLE: DS NAME: MEDINA, LOIDA STREET ADDRESS: 8545 KEPHART LN CITY-ST-ZIP: BERRIEN SPRINGS, FL 49103	<input type="checkbox"/> Delete
TITLE: DT NAME: CASTRO, ISRAEL H STREET ADDRESS: 16140 KENNY ROAD CITY-ST-ZIP: LAUREL, MD 20707	<input checked="" type="checkbox"/> Delete
TITLE: DM NAME: CHEN, DELMA Q STREET ADDRESS: 1401 WEST SILVER OAK DRIVE CITY-ST-ZIP: AVON PARK, FL 33825	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE: DP NAME: Villanueva, Jedd STREET ADDRESS: 1751 Mill Plain Rd. CITY-ST-ZIP: Fairfield, CT 06430	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: DVT NAME: Roda, Alva STREET ADDRESS: 3400 Bitterwood Pl. CITY-ST-ZIP: Laurel, MD 20724	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: DS NAME: Medina, Loida S. STREET ADDRESS: 8545 Kephart Ln. CITY-ST-ZIP: Berrien Springs, MI 49103	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: D NAME: Chen, M.D., Delma Q. STREET ADDRESS: 1401 W. Silver Oak Dr. CITY-ST-ZIP: Avon Park, FL 33825	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

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: Delma A. Q. Chen MD 8/9/2006 863-453-6565
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT

50025552

ATTACHMENT TO 2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT FOR
PUC / AUP ALUMNI ASSOCIATION, USA, INC. (#N01000003267)

CONTINUATION OF BOX 11
(Additions)

TITLE	D
NAME	Villanueva, Samuel
STREET ADDRESS	1751 Mill Plain Rd.
CITY - STATE - ZIP	Fairfield, CT 06824

TITLE	D
NAME	Pugao, Ramoncito
STREET ADDRESS	7205 Poplar Creek Terrace
CITY - STATE - ZIP	Nashville, TN 37221

TITLE	D
NAME	Pantangco, Jr., M.D., Irineo
STREET ADDRESS	6702 Elmers Court
CITY - STATE - ZIP	Worthington, OH 43085

TITLE	D
NAME	Roda, M.D., Andy
STREET ADDRESS	80 Cliff Loop Rd.
CITY - STATE - ZIP	Hot Springs, AR 71913

GRAY | ROBINSON ATTACHMENT
ATTORNEYS AT LAW

SUITE 1400
301 EAST PINE STREET (32801)
P.O. Box 3068
ORLANDO, FL 32802-3068
TEL 407-843-8880
FAX 407-244-5690
gray-robinson.com

CLERMONT
FORT LAUDERDALE
JACKSONVILLE
KEY WEST
LAKELAND
MELBOURNE
NAPLES
ORLANDO
TALLAHASSEE
TAMPA

407-244-5639

DSTEWART@GRAY-ROBINSON.COM

August 10, 2006

500255-57
#101008003267

Department of State
Division of Corporations
Corporate Filings
Post Office Box 6327
Tallahassee, Florida 32314

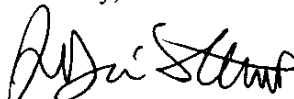
Re: 2006 Not-for-Profit Corporation Annual Report for:
PUC / AUP Alumni Association, USA, Inc.
Our File No. 8977-1

Dear Madam or Sir:

Please accept for filing the enclosed, fully executed, two paged 2006 Not-For-Profit Corporation Annual Report together with the check payable to "Florida Department of State" in the amount of \$61.25 to cover the cost of the filing fee.

If you should require any additional information, please do not hesitate to contact me.

Sincerely,


D. Darin Stewart

JDS/prl
Enclosures

cc: Jedd Villanueva (w/ encls. via email)