

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000006134

FILED
Feb 16, 2012
Secretary of State

Entity Name: FEDERATION OF NORTHERN CARIBBEAN UNIVERSITY ALUMNI ASSOCIATION NORTH AMERICA
INC

Current Principal Place of Business:

3475 SW RIVERS END WAY
PALM CITY, FL 34990

New Principal Place of Business:

Current Mailing Address:

706 BUCCANEER CT
SILVER SPRING, MD 20904

New Mailing Address:

FEI Number: 20-5038362 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

MCBEAN, VILROY
8285 NW 125TH LANE
PARKLAND, FL 34990 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: PRES
Name: MCBEAN, VILROY
Address: 706 BUCCANEER CT
City-St-Zip: SILVER SPRING, MD 20904

Title: VP
Name: WEIR-CAMPBELL, VILMA
Address: 3465 ROLLING HILLS LANE
City-St-Zip: APOPKA, FL 32712

Title: VP
Name: CAMPBELL 11, S PETER
Address: 1453 NEWDAWN LANE
City-St-Zip: BEAUMONT, CA 92223

Title: TR
Name: DALEY, EVERARD A
Address: 3611 ROCHELLE LANE
City-St-Zip: APOPKA, FL 32712

Title: SEC
Name: POTTINGER, DR. DAHILA
Address: 3819 RIVER RIDGE CT
City-St-Zip: DECATUR, GA 30034

Title: PARL
Name: CLAYTON, HAROLD
Address: 1371 SW 105TH AVE
City-St-Zip: PEMBROKE PINES, FL 33025

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: EVERARD A. DALEY

TREA

02/16/2012

Electronic Signature of Signing Officer or Director

_____ Date