

2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Dec 20, 2008
Secretary of State

DOCUMENT# N06000010508

Entity Name: ST. GREGORY'S COLLEGE ALUMNI FOUNDATION INC.

Current Principal Place of Business:

1799 NE 164TH STREET
102
NORTH MIAMI BEACH, FL 33162

New Principal Place of Business:

Current Mailing Address:

17888 67TH COURT NORTH
LOXAHATCHEE, FL 33470

New Mailing Address:

FEI Number: 20-5837353 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

INCORP SERVICES, INC.
17888 67TH COURT NORTH
LOXAHATCHEE, FL 33470 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: ANTHONY OHAI

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BENSON, LIONEL O DR.
Address: 2064 SILVERWOOD DRIVE
City-St-Zip: NEWTOWN, PA 18940

Title: S () Delete
Name: ODIASE, ANTHONY O
Address: 4144 PONTA ALTA DRIVE
City-St-Zip: LOS ANGELES, CA 90008

Title: T () Delete
Name: OGUDELE, ADEBAYO CPA
Address: 4272 N.154TH AVENUE
City-St-Zip: GOODYEAR, AZ 85338

Title: D () Delete
Name: OHAI, ANTHONY
Address: 44 UNDERWOOD ROAD
City-St-Zip: LEVITTOWN, PA 19056

Title: D () Delete
Name: AJEGBA, DANIEL
Address: 150 KILMAR STREET
City-St-Zip: ROCHESTER, NY 14621

Title: D () Delete
Name: ASIRU, DOLAPO
Address: 9663 SANTA MONICA BLVD
City-St-Zip: BEVERLY HILLS, CA 90210

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: ANTHONY OHAI

Electronic Signature of Signing Officer or Director

DIR

12/20/2008

Date