

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N51072

FILED
Feb 02, 2011
Secretary of State

Entity Name: HOLMWOOD PAST STUDENT ASSOCIATION, SOUTH FLORIDA CHAPTER, INC.

Current Principal Place of Business:

6678 CONCH CT.
BOYNTON BEACH, FL 33437 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 25935
TAMARAC, FL 33320 US

New Mailing Address:

FEI Number: 65-0421944

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WALLACE-MITCHENER, VERONICA -
6678 CONCH CT.
BOYNTON BEACH, FL 33437 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: PD
Name: WALLACE-MITCHENER, VERONICA
Address: 6678 CONCH CT.
City-St-Zip: BOYNTON BEACH, FL 33437

Title: VPD
Name: NOTICE, PAUL
Address: 1163 FOXFORREST CIR.
City-St-Zip: APOPKA, FL 32712

Title: VPD
Name: SMITH, ALTHEA
Address: 5606 NW 189 ST.
City-St-Zip: MIAMI GARDENS, FL 33055

Title: SD
Name: HOLNESS, YVONNE
Address: 4095 NW 92 AVE
City-St-Zip: SUNRISE, FL 33351

Title: TD
Name: MCGHIE, LLOYD
Address: 9896 NOB HILL CT BLDG 5
City-St-Zip: SUNRISE, FL 33351

Title: AT
Name: WINT, ELAINE
Address: 2223 OAKMONT DRIVE
City-St-Zip: WEST PALM BEACH, FL 33404

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: LLOYD MCGHIE

TD

02/02/2011

Electronic Signature of Signing Officer or Director

Date