

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000005376

FILED
Mar 20, 2011
Secretary of State

Entity Name: EXCELSIOR ALUMNI ASSOCIATION OF FLORIDA, INC.

Current Principal Place of Business:

1991 SW 94 TERRACE
MIRAMAR, FL 33025

New Principal Place of Business:

Current Mailing Address:

1991 SW 94 TERRACE
MIRAMAR, FL 33025

New Mailing Address:

FEI Number: 65-0701381

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBINSON, ALTHEA
1991 SW 94 TERRACE
MIRAMAR, FL 33025 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: D
Name: FIDLER, MAUREEN
Address: 11440 SW 18 COURT
City-St-Zip: MIRAMAR, FL 33029

Title: P
Name: ROBINSON, ALTHEA
Address: 1990 SW 94 THE TERR
City-St-Zip: MIRAMAR, FL 33025

Title: S
Name: PITTER, JUDITH
Address: 3829 EAST LAKE TERR
City-St-Zip: MIRAMAR, FL 33023

Title: T
Name: CAMPBELL, DOREEN
Address: 8361 N.W. 45TH STREET
City-St-Zip: LAUDERHILL, FL 33351

Title: VP
Name: HOWE, OWEN
Address: 3390 FOXCROFT ROAD. APT# 111
City-St-Zip: MIRAMAR, FL 33025

Title: D
Name: BYFIELD, DEBRA
Address: 9675 NW 26 PLACE - VILLA 5
City-St-Zip: SUNRISE, FL 33322

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: DOREEN CAMPBELL

T

03/20/2011

Electronic Signature of Signing Officer or Director

Date