2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000003346

FILED May 09, 2010 Secretary of State

Entity Name: ST. ELIZABETH TECHNICAL HIGH SCHOOL ALUMNI ASSOCIATION OF FLORIDA, INC.

Current Principal Place of Business: New Principal Place of Business:

P. O. BOX 451006 SUNRISE, FL 33345

Current Mailing Address: New Mailing Address:

P. O. BOX 451006 SUNRISE, FL 33345

FEI Number: 65-0760395 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ROBINSON, REUBEN A TREASUR 2011 NW 37TH TERRACE 405 LAUDERDALE LAKES, FL 33311 US

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:

Γitle: PRES

 Name:
 BRAMWELL, DAWN S MRS

 Address:
 P.O. BOX 451006

 City-St-Zip:
 SUNRISE, FL 33345

Title: SECR

Name: WEDDERBURN, SHERRYLYN MRS.

Address: P.O. BOX 451006 City-St-Zip: SUNRISE, FL 33345

Title: A/SE

Name: NORVILLE, JOAN MRS Address: P.O. BOX 451006 City-St-Zip: SUNRISE, FL 33345

Title: TRES

Name: ROBINSON, REUBEN A MR Address: P.O. BOX 451006

City-St-Zip: SUNRISE, FL 33345

Title: VP

 Name:
 CROOKS, HURCHELL

 Address:
 P.O. BOX 451006

 City-St-Zip:
 SUNRISE, FL 33345

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: REUBEN ROBINSON, TREASURER MR 05/09/2010