## 2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000004032

Entity Name: ALPHA RHO BOULE FOUNDATION, INC

many rumor run in the Booker Constitution,

**Current Principal Place of Business:** 

10300 SW 216TH ST MIAMI, FL 33190

**Current Mailing Address:** 

P.O. BOX 97-1637

MIAMI, FL 33697-4853 US

FEI Number: 90-0708187 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

MONCRIEF, LAWRENCE E 9425 PEABODY CT BOCA RATON, FL 33496 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

FILED Apr 27, 2016

**Secretary of State** 

CC9947017290

Officer/Director Detail:

Title PRESIDENT Title VP

 Name
 MCADORY, JOHN T MD
 Name
 ALUKO, OLA

 Address
 8401 SW 114 ST
 Address
 14951 SW 157 CT

 City-State-Zip:
 MIAMI FL 33156
 City-State-Zip: MIAMI FL 33196

Title VP Title SECY

 Name
 PHILLIP, PAUL
 Name
 HOLLAND, ROBERT

 Address
 1200 GINGER CIRCLE
 Address
 1231 NE 83 ST

 City-State-Zip:
 WESTON FL 33326
 City-State-Zip:
 MIAMI FL 33138

Title DIRECTOR Title TREASURER

Name GULLEY, CLINTON Name ROYSTON, ALVA

Address 7959 SW 184TH WAY Address 8832 SW 209TH TERRACE

City-State-Zip: MIAMI FL 33197 City-State-Zip: CUTLER BAY FL 33189

Title DIRECTOR Title DIRECTOR

NameCOUSINS, HERBERTNameJONAS, CECIL MDAddress3966 WEST HIBISCUS STAddress4272 SW 186 AVECity-State-Zip:WESTON FL 33332City-State-Zip:MIRAMAR FL 33029

Continues on page 2

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: JOHN T. MCADORY, MD PRESIDENT 04/27/2016

Electronic Signature of Signing Officer/Director Detail

Date

## Officer/Director Detail Continued:

Title DIRECTOR Title DIRECTOR

Name BURKETT, MARTIN Name HALL, ANTHONY

Address 14131 SW 33 CT Address 650 COCONUT PALM TERR

City-State-Zip: DAVIE FL 33330 City-State-Zip: PLANTATION FL 33324

Title DIRECTOR Title DIRECTOR

NameTRIBBLE, KEITHNameHARTLEY, BRODESAddress17321 SW 35 STAddress19338 SW 80 CT

City-State-Zip: MIRAMAR FL 33029 City-State-Zip: CUTLER BAY FL 33157