2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000004032

Entity Name: ALPHA RHO BOULE FOUNDATION, INC

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: No

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 02, 2015

Secretary of State

CC0702593681

Officer/Director Detail:

Title PRES Title VP

NameHARTLEY, BRODESNameJONAS, CECIL R DRAddress19338 SW 80TH CT.Address4272 SW 186TH AVECity-State-Zip:CUTLER BAY FL 33157City-State-Zip:MIRMAR FL 33029

Title VP Title SECY

 Name
 MCADORY, JOHN T DR
 Name
 MONCRIEF, LAWRENCE

 Address
 8401 SW 114TH ST
 Address
 9425 PEABODY CT

 City-State-Zip:
 MIAMI FL 33156
 City-State-Zip:
 BOCA RATON FL 33496

Title DIRECTOR Title DIRECTOR

NameALSTON, COREY LNameGULLEY, CLINTONAddress8620 NW 48TH STAddress7959 SW 184TH WAYCity-State-Zip:LAUDERHILL FL 33351City-State-Zip:MIAMI FL 33197

Title TREASURER Title DIRECTOR

Name ROYSTON, ALVA

Address 8832 SW 209TH TERRACE Address 8560 SW 166TH ST

City State Zin: PALMETTO BAY EL 3316

City-State-Zip: CUTLER BAY FL 33189 City-State-Zip: PALMETTO BAY FL 33157

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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: BRODES H. HARTLEY JR.

PRESIDENT

04/02/2015

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR

Name KING-SHAW, RUBEN Address 465 BRICKELL AVE

City-State-Zip: MIAMI FL 33131

Title DIRECTOR

Name MILTON, ISRAEL H Address 3809 ALCANTRA AVE

City-State-Zip: MIAMI FL 33178

Title DIRECTOR

Name LOCKHART, JAMES AB

Address 1314 LAS OLAS BLVD

1060

City-State-Zip: FT. LAUDERDALE FL 33301