

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N15000004385

**Entity Name:** COLLEGE SAINT JOSEPH ALUMNI ASSOCIATION INC.

**Current Principal Place of Business:**

1851 BANKS RD  
MARGATE, FL 33063

**Current Mailing Address:**

7385 NW 68 WAY  
PARKLAND, FL 33067 US

**FEI Number: 47-3886118**

**Certificate of Status Desired: No**

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

SAMSON, CLAUDEL JOSEPH  
7385 NW 68 WAY  
PARKLAND, FL 33067 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: CLAUDEL SAMSON**

**03/06/2024**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title D/P  
Name SAMSON, CLAUDEL  
Address 1851 BANKS RD  
City-State-Zip: MARGATE FL 33063

Title D/VP  
Name PIERROT, HANS M  
Address 1851 BANKS RD  
City-State-Zip: MARGATE FL 33063

Title D/VP  
Name JEAN BAPTISTE, JEAN RICHARD  
Address 1851 BANKS RD  
City-State-Zip: MARGATE FL 33063

Title D/T  
Name MAGLOIRE, MANFRED  
Address 1851 BANKS RD  
City-State-Zip: MARGATE FL 33063

Title D/PR  
Name LAURENT, FRITZ GERALD  
Address 1851 BANKS RD  
City-State-Zip: MARGATE FL 33063

Title D/S  
Name CHERIZARD, GREGORY  
Address 1851 BANKS RD  
City-State-Zip: MARGATE FL 33063

*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: CLAUDEL SAMSON**

**PRESIDENT**

**03/06/2024**

Electronic Signature of Signing Officer/Director Detail

Date