2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N51072

Entity Name: HOLMWOOD PAST STUDENT ASSOCIATION, SOUTH FLORIDA

CHAPTER, INC.

DA .

Apr 29, 2015 Secretary of State CC4137820054

FILED

Current Principal Place of Business:

9011 BERMUDA DRIVE MIRAMAR, FL 33025

Current Mailing Address:

P.O. BOX 590892

FORT LAUDERDALE, FL 33359 US

FEI Number: 65-0421944 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MCGHIE, LLOYD G 9011 BERMUDA DRIVE MIRAMAR, FL 33025 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: LLOYD G. MCGHIE 04/29/2015

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title PRESIDENT Title VP

Name MCGHIE, LLOYD Name DAVEY, PAUL
Address P.O. BOX 590892 Address P.O. BOX 590892

City-State-Zip: FORT LAUDERDALE FL 33359 City-State-Zip: FORT LAUDERDALE FL 33359

Title 2 ND VP Title SECRETARY

Name EARLE, LEXLEY Name WELLINGTON, CAROL

Address P.O. BOX 590892 Address P.O. BOX 590892

City-State-Zip: FORT LAUDERDALE FL 33359 City-State-Zip: FORT LAUDERDALE FL 33359

TitleASST. SECRETARYTitleTREASURERNameHOLINESS, YVONNENameNOTICE, PAULAddressP.O. BOX 590892AddressP.O. BOX 590892

City-State-Zip: FORT LAUDERDALE FL 33359 City-State-Zip: FORT LAUDERDALE FL 33359

Title ASST. TREASURER
Name MUIR, NEWTON
Address P.O. BOX 590892

City-State-Zip: FORT LAUDERDALE FL 33359

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: NEWTON MUIR TREASURER 04/29/2015