## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 700307** 

FILED Feb 04, 2009 Secretary of State

Entity Name: ROLLINS COLLEGE ALUMNI ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** ROLLINS COLLEGE 1000 HOLT AVENUE, BOX 2736 WINTER PARK, FL 32789 **New Mailing Address: Current Mailing Address: ROLLINS COLLEGE** ROLLINS COLLEGE ALUMNI ASSOCIATION 1000 HOLT AVENUE, BOX 2736 1000 HOLT AVENUE, BOX 2736 WINTER PARK, FL 32789 WINTER PARK, FL 32789 FEI Number: 59-0703842 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: FRANCETIC, ELIZABETH D DIRECTO 1000 HOLT ÁVE-2736 WINTER PARK, FL 32789 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change ( ) Addition AUGER, BARBARA WELLS, KURT Name: Name: 639 CHANCEY LANE Address: 2826 CALEDON LANE Address: City-St-Zip: TALLAHASSEE, FL 32308 US City-St-Zip: CINCINNATI, OH 45422 US Title: () Delete Title: () Change () Addition OURISMAN, ROBERT Name: Name: Address: 4049 MANSION DRIVE NW Address: City-St-Zip: WASHINGTON, DC 20007 US City-St-Zip: Title: () Delete Title: () Change () Addition ASHWELL, ELIZABETH Name: Name: Address: 7340 FORSYTH #208 Address: City-St-Zip: SAINT LOUIS, MO 63105 US City-St-Zip: (X) Change ( ) Addition Title: Title: () Delete Name: WELLS, KURT Name: CHANIN, JAMES 1676 SUNSET BLVD Address: 2826 CALEDON LANE Address: City-St-Zip: CINCINNATI, OH 45422 US City-St-Zip: BOLDER, CO 80304 US Title: () Delete Title: () Change () Addition BOK, PETER Name: Name: 1520 KADLESTON WAY NE Address: Address: City-St-Zip: ATLANTA, GA 30319 US City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ELIZABETH D. FRANCETIC D 02/04/2009