

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 714341

FILED
Feb 01, 2006
Secretary of State

Entity Name: FLORIDA ATLANTIC UNIVERSITY ALUMNI ASSOCIATION, INC.

Current Principal Place of Business:

FLORIDA ATLANTIC UNIV.
777 GLADES ROAD ADM 201
BOCA RATON, FL 33431 US

New Principal Place of Business:

Current Mailing Address:

FLORIDA ATLANTIC UNIV.
777 GLADES ROAD ADM 201
BOCA RATON, FL 33431 US

New Mailing Address:

FEI Number: 59-0917284

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BREMAN, PATRICIA
777 GLADES RD ADM 201
FLORIDA ATLANTIC UNIVERSITY
BOCA RATON, FL 33431 US

Name and Address of New Registered Agent:

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:

Title: PRES () Delete
Name: POLLER, NEALE
Address: 3003 OAKTREE LANE
City-St-Zip: HOLLYWOOD, FL 33021

Title: PR/E () Delete
Name: BARBAR, ANTHONY
Address: 1441 TAMARIND WAY
City-St-Zip: BOCA RATON, FL 33486

Title: VP () Delete
Name: BRANCH, GLORIA
Address: 661 NE MARINE DR
City-St-Zip: BOCA RATON, FL 33431

Title: SECR () Delete
Name: GEARING, TERRY
Address: 11690 FICUS STREET
City-St-Zip: WEST PALM BEACH, FL 33410

Title: TRSR () Delete
Name: CABRERA, JORGE
Address: 417 PALO ALTO DRIVE
City-St-Zip: PALM SPRINGS, FL 33461

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: PATRICIA BREMAN

RA

02/01/2006

Electronic Signature of Signing Officer or Director

Date