

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 725321

FILED
Feb 04, 2010
Secretary of State

Entity Name: ST. PETERSBURG COLLEGE ALUMNI ASSOCIATION, INC.

Current Principal Place of Business:

6021 142ND AVE N
CLEARWATER, FL 33760 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 13489
ST. PETERSBURG, FL 33733 US

New Mailing Address:

FEI Number: 23-7363905

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCKENZIE III, SYDNEY H
13805 58TH ST N
CLEARWATER, FL 33760 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: P
Name: WELCH, JEAN
Address: 100 73RD AVE N APT. 215
City-St-Zip: ST. PETERSBURG, FL 33702

Title: D
Name: HELMS, JANE E
Address: 1918 WESTLEY STREET
City-St-Zip: SAFETY HARBOR, FL 34695

Title: D
Name: CREVELING, HAZEL
Address: 6551 15TH AVENUE NORTH
City-St-Zip: ST. PETE, FL 33710

Title: T
Name: BROWN, JOHN
Address: 439 JACKSON STREET
City-St-Zip: DUNEDIN, FL 34698

Title: D
Name: BURKES, KENNETH P
Address: 14428 TANGLEWOOD DRIVE
City-St-Zip: LARGO, FL 33774

Title: D
Name: MACK, PSALMS
Address: 1001 MOHAWK STREET
City-St-Zip: CLEARWATER, FL 34675

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: TIFFANY STALLARD

MS.

02/04/2010

Electronic Signature of Signing Officer or Director

Date