

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 769667

FILED
Apr 27, 2009
Secretary of State

Entity Name: SCOTTISH AMERICAN SOCIETY OF SOUTH FLORIDA, INC.

Current Principal Place of Business:

1301 NW 99TH AVE
PLANTATION, FL 33322

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 245926
PEMBROKE PINES, FL 330245926 US

New Mailing Address:

FEI Number: 59-1778602

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MACDONALD, NIGEL
1301 NW 99TH AVENUE
PLANTATION, FL 33322 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: D () Delete
Name: MCWILLIAM, MAUREEN
Address: 11692 NW 20TH DRIVE
City-St-Zip: CORAL SPRINGS, FL 33071

Title: P () Delete
Name: BUCHANAN, PETER
Address: 1611 NW 85TH TERRACE
City-St-Zip: PLANTATION, FL 33317

Title: D () Delete
Name: BUCHANAN, NAN
Address: 1611 NW 85TH TERRACE
City-St-Zip: PLANTATION, FL 33317

Title: T () Delete
Name: RITCHIE, ROBERT
Address: 304 SW 6TH STREET
City-St-Zip: HALLANDALE, FL 33009

Title: S () Delete
Name: WEST, FAYE
Address: 7909 NW 73 TERRACE
City-St-Zip: TAMARAC, FL 33321

Title: VP () Delete
Name: WEST, EDDY
Address: 7909 NW 73 TERRACE
City-St-Zip: TAMARAC, FL 33321

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: MCWILLIAM, MAUREEN
Address: 110 S.W. 120 WAY
City-St-Zip: CORAL SPRINGS, FL 33071

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: T (X) Change () Addition
Name: CAMPBELL, RENEE
Address: 1121 N.E. 13 AVENUE
City-St-Zip: FORT LAUDERDALE, FL 33304

Title: S (X) Change () Addition
Name: BILLIG, ANITA
Address: 8105 N.W. 101 AVENUE
City-St-Zip: TAMARAC, FL 33321

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: RENEE CAMPBELL

T

04/27/2009

Electronic Signature of Signing Officer or Director

Date