2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 769667

FILED Mar 06, 2010 Secretary of State

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

Current Principal Place of Business: New Principal Place of Business:

1301 NW 99TH AVE 1121 NE 13 AVENUE

PLANTATION, FL 33322 FORT LAUDERDALE, FL 33304

Current Mailing Address: New Mailing Address:

P..O.BOX 245926 1121 NE 13 AVENUE

PEMBROKE PINES, FL 330245926 US FORT LAUDERDALE, FL 33304

FEI Number: 59-1778602 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:

MACDONALD, NIGEL 1301 NW 99TH AVENUE PLANTATION, FL 33322 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:

Title: VP

Name: SWACKHAMMER, VICTOR
Address: 5615 FORREST STREET
City-St-Zip: HOLLYWOOD, FL 33021-274

Title: D

Name: CAMPBELL, DAVID Address: 1121 NE 13 AVENUE

City-St-Zip: FORT LAUDERDALE, FL 33304

Title:

 Name:
 SLAVIN, MIKE

 Address:
 10483 SW 54 STREET

 City-St-Zip:
 COOPER CITY, FL 33328

Title: F

 Name:
 RITCHIE, ROBERT

 Address:
 304 SW 6TH STREET

 City-St-Zip:
 HALLANDALE, FL 33009

Title:

Name: CAMPBELL, RENEE Address: 1121 N.E. 13 AVENUE

City-St-Zip: FORT LAUDERDALE, FL 33304

Title:

Name: BILLIG, ANITA

Address: 8105 N.W. 101 AVENUE City-St-Zip: TAMARAC, FL 33321

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: RENEE CAMPBELL TREA 03/06/2010