

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 771097

FILED  
Jun 13, 2011  
Secretary of State

**Entity Name:** UNIVERSITY OF PENNSYLVANIA DADE ALUMNI CLUB, INC.

**Current Principal Place of Business:**

260 CRANDON BLVD  
SUITE 32, #121  
KEY BISCAVNE, FL 33149 US

**New Principal Place of Business:**

**Current Mailing Address:**

260 CRANDON BLVD  
SUITE 32, #121  
KEY BISCAVNE, FL 33149 US

**New Mailing Address:**

**FEI Number:** 59-2358668

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BALONEK, AMELIA  
260 CRANDON BLVD  
SUITE 32, #121  
KEY BISCAVNE, FL 33149 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: DIAZ, FAQUIRY  
Address: 260 CRANDON BLVD, SUITE 32, #121  
City-St-Zip: KEY BISCAVNE, FL 33149 US

Title: V  
Name: ROSENBERG, AMY  
Address: 260 CRANDON BLVD, SUITE 32, #121  
City-St-Zip: KEY BISCAVNE, FL 33149 US

Title: T  
Name: BALONEK, AMELIA  
Address: 260 CRANDON BLVD, SUITE 32, #121  
City-St-Zip: KEY BISCAVNE, FL 33149 US

Title: V  
Name: BRADY, CHIP  
Address: 260 CRANDON BLVD, SUITE 32, #121  
City-St-Zip: KEY BISCAVNE, FL 33149 US

Title: V  
Name: ZIENTZ HECKLER, TIFFANY  
Address: 260 CRANDON BLVD, SUITE 32, #121  
City-St-Zip: KEY BISCAVNE, FL 33149 US

Title: V  
Name: WEISS BRADY, ALLISON  
Address: 260 CRANDON BLVD, SUITE 32, #121  
City-St-Zip: KEY BISCAVNE, FL 33149 US

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: AMELIA K. BALONEK

T

06/13/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date