

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000002881

FILED
Apr 15, 2008
Secretary of State

Entity Name: HALLANDALE HIGH ALUMNI AND FRIENDS ASSOCIATION, INCORPORATED

Current Principal Place of Business:

P.O. BOX 3745
HALLANDALE BEACH, FL 33009

New Principal Place of Business:

2710 PLUNKETT STREET
HOLLYWOOD, FL 33020

Current Mailing Address:

P.O. BOX 3745
HALLANDALE BEACH, FL 33009

New Mailing Address:

FEI Number: 65-0958823 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

ALFORD, TAMMIE ROYSTER
2710 PLUNKETT STREET
HOLLYWOOD, FL 33020 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: PD () Delete
Name: GORDON, QUNEA D
Address: 2400 E. LAS OLAS BLVD., STE.247
City-St-Zip: FT. LAUDERDALE, FL 33307

Title: VD () Delete
Name: THOMAS, VERNELL
Address: 304 N.W. 3RD. COURT
City-St-Zip: HALLANDALE, FL 33009

Title: VD () Delete
Name: REMBERT, JOVAN
Address: 509 N.W. 7TH COURT
City-St-Zip: HALLANDALE, FL 33009

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: GORDON, QUNEA D
Address: 1041 SOUTH PARK #211
City-St-Zip: HOLLYWOOD, FL 33021

Title: VD (X) Change () Addition
Name: THOMAS-ROBERTS, VERNELL
Address: 304 N.W. 3RD. COURT
City-St-Zip: HALLANDALE, FL 33009

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

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: QUNEA D. GORDON

MS.

04/15/2008

Electronic Signature of Signing Officer or Director

Date