

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000008547

FILED
Feb 10, 2007
Secretary of State

Entity Name: TITCHFIELD ALUMNI ASSOCIATION, INC.

Current Principal Place of Business:

12672 85TH ROAD N
WEST PALM BEACH, FL 33412

New Principal Place of Business:

Current Mailing Address:

12672 85TH ROAD N
WEST PALM BEACH, FL 33412

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

MARCH, EDITH D
12672 85TH ROAD N
WEST PALM BEACH, FL 33412 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: MARCH, EDITH
Address: 12672 85TH ROAD N
City-St-Zip: WEST PALM BEACH, FL 33412

Title: VD () Delete
Name: RHODD, HYACINTH
Address: 9750 SW 218TH STREETT
City-St-Zip: MIAMI, FL 33190

Title: SD () Delete
Name: MYRIE, WINNIFRED
Address: 7917 CORAL BLVD
City-St-Zip: MIRAMAR, FL 33023

Title: ASD () Delete
Name: MOO, JACKIE
Address: 11955 SW 66TH AVENUE
City-St-Zip: MIAMI, FL 33156

Title: TD () Delete
Name: BARTON, GRACE
Address: 551 NW 185TH STREET
City-St-Zip: MIAMI, FL 33169

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: EDITH D MARCH

PD

02/10/2007

Electronic Signature of Signing Officer or Director

Date