

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000006256

Entity Name: MUNRO HAMPTON ALUMNI, INC.

FILED  
Sep 08, 2004  
Secretary of State

## Current Principal Place of Business:

P.O. BOX 551827  
FT. LAUDERDALE, FL 33355

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 551827  
FT. LAUDERDALE, FL 33355

## New Mailing Address:

FEI Number: 65-1139147

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

COKE, L. ASHLEY  
13926 S. CYPRESS COVE CIR.  
DAVIE, FL 33325 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: COKE, L. ASHLEY  
Address: 13926 S. CYPRESS COVE CIR.  
City-St-Zip: FT. LAUDERDALE, FL 33325

Title: TD ( ) Delete  
Name: MARSHALL, ROBERT  
Address: 3338 NW 22ND ST.  
City-St-Zip: LAUDERDALE LAKES, FL 33311

Title: SD ( ) Delete  
Name: GRANT, NADINE  
Address: P. O. BOX 492152  
City-St-Zip: FT. LAUDERDALE, FL 33349

Title: VD ( ) Delete  
Name: BRAVO, ROBERT  
Address: 11419 CLEAR CREEK PL.  
City-St-Zip: BOCA RATON, FL 33428

Title: D ( ) Delete  
Name: STEPHENSON, OLIVIER  
Address: 3880 WOODSIDE DR., APT. A  
City-St-Zip: CORAL SPRINGS, FL 33065

## 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 Section 119.07(3)(i), 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: L. ASHLEY COKE

PD

09/08/2004

Electronic Signature of Signing Officer or Director

Date