

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01228

FILED  
Jul 02, 2007  
Secretary of State

**Entity Name:** ALUMNI ACHIEVEMENT AWARDS, INC.

**Current Principal Place of Business:**

4580 KETCHWOOD CIRCLE  
HIGHLANDS RANCH, CO 80130 US

**New Principal Place of Business:**

**Current Mailing Address:**

4580 KETCHWOOD CIRCLE  
HIGHLANDS RANCH, CO 80130 US

**New Mailing Address:**

**FEI Number:** 59-2413171 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

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

LEIGH, RICHARD A  
1031 WEST MORSE BLVD. STE 350  
WINTER PARK, FL 32789 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: PD ( ) Delete  
Name: COLLETT, JULIE E  
Address: 4580 KETCHWOOD CIRCLE  
City-St-Zip: HIGHLANDS RANCH, CO 80130 US

Title: C ( ) Delete  
Name: SUMMEROUR, BOB MD  
Address: 5173 HALLWOOD DRIVE  
City-St-Zip: RIVERSIDE, CA 92506

Title: T ( ) Delete  
Name: DEFOOR, BYRON  
Address: 9412 STANDIFER GAP ROAD  
City-St-Zip: OOLTEWAH, TN 37363

Title: C ( ) Delete  
Name: GERARD, GREG  
Address: 397 ACADEMY DRIVE  
City-St-Zip: CALHOUM, GA 30701

Title: T ( ) Delete  
Name: WILT, GARY  
Address: 8822 APISON PIKE  
City-St-Zip: OOLTEWAH, TN 37363

Title: T ( ) Delete  
Name: DEHAAN, CH  
Address: 8927 E. CAROL WAY  
City-St-Zip: SCOTTSDALE, AZ 85260

**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:

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: JULIE COLLETT

ED

07/02/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date