

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000003163

FILED
Apr 28, 2008
Secretary of State

Entity Name: ST. HUGH'S ALUMNAE ASSOCIATION OF SOUTH FLORIDA, INC.

Current Principal Place of Business:

18350 NW 2ND AVENUE
SUITE 500
MIAMI, FL 33169

New Principal Place of Business:

Current Mailing Address:

18350 NW 2ND AVENUE
SUITE 500
MIAMI, FL 33169

New Mailing Address:

FEI Number: 01-0680826 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARTIN, CECILE
18350 NW 2ND AVENUE
SUITE 500
MIAMI, FL 33169 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,D () Delete
Name: MURPHY, KAREN LEE
Address: 17944 SW 33RD COURT
City-St-Zip: MIRAMAR, FL 33026

Title: V,D () Delete
Name: MCLEOD, MAPLE
Address: 5807 NW 81ST TERRACE
City-St-Zip: TAMARAC, FL 33321

Title: S,D () Delete
Name: WRIGHT, JANICE
Address: 189070 NE 2ND AVENUE, #101
City-St-Zip: MIAMI, FL 33179

Title: T,D () Delete
Name: BOOTHE, SHARLEEN
Address: 5071 SW 122 TERRACE
City-St-Zip: COOPER CITY, FL 33330

Title: D () Delete
Name: WHITE, CARROLL
Address: 260 COMMODORE DRIVE #1220
City-St-Zip: PLANTATION, FL 33325

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: V,D (X) Change () Addition
Name: WILDS, VALERIE
Address: 12871 SW 28TH COURT
City-St-Zip: MIRAMAR, FL 33027

Title: S,D (X) Change () Addition
Name: BYGRAVE, JACKIE
Address: 110 SW 28 COURT
City-St-Zip: PLANTATION, FL 33324

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: KAREN LEE MURPHY

P/D

04/28/2008

Electronic Signature of Signing Officer or Director

Date