

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000003574

FILED
Mar 11, 2009
Secretary of State

Entity Name: MHS (JA) ALUMNI, FLORIDA CHAPTER INC.

Current Principal Place of Business:

7921 SOUTH SOUTHWOOD CIRCLE
DAVIE, FL 33328

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 100523
FT. LAUDERDALE, FL 33310

New Mailing Address:

FEI Number: 03-0468378

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCPHERSON, PAUL
7921 S. SOUTHWOOD CIRCLE
DAVIE, FL 33328 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: PAUL, MCPHERSON
Address: 7921 S. SOUTHWOOD CIRCLE
City-St-Zip: DAVIE, FL 33328

Title: TD () Delete
Name: JOHNSON, AUDREY
Address: 7921 S. SOUTHWOOD CIRCLE
City-St-Zip: DAVIE, FL 33328

Title: SD () Delete
Name: HARRIS, CARL
Address: 7921 S. SOUTHWOOD CIRCLE
City-St-Zip: DAVIE, FL 33328

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:

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: CARL HARRIS

SD

03/11/2009

Electronic Signature of Signing Officer or Director

Date