

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N02000005850

**FILED**  
**Jan 06, 2010**  
**Secretary of State**

**Entity Name:** HAND FELLOWS ALUMNI ASSOCIATION, INC

**Current Principal Place of Business:**

3450 HULL ROAD  
RM 3341  
GAINESVILLE, FL 32607

**New Principal Place of Business:**

**Current Mailing Address:**

POB 112727  
GAINESVILLE, FL 326110272

**New Mailing Address:**

**FEI Number:** 37-1457997

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KEENE, B  
3450 HULL RD , # 3341  
GAINESVILLE, FL 32607 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  
**Name:** DELL, PAUL C  
**Address:** 3450 HULL RD , RM 3341  
**City-St-Zip:** GAINESVILLE, FL 32607 AL

**Title:** SD  
**Name:** CHIDGEY, LARRY  
**Address:** 3450 HULL ROAD  
**City-St-Zip:** GAINESVILLE, FL 32607 AL

**Title:** TD  
**Name:** WRIGHT, THOMAS W  
**Address:** 3450 HULL ROAD  
**City-St-Zip:** GAINESVILLE, FL 32607 AL

I hereby 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 all other like empowered.

**SIGNATURE:** PAUL C DELL,

PD

01/06/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date