

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000005892

FILED  
Jan 06, 2005  
Secretary of State

Entity Name: STUDENT FARMWORKER ALLIANCE, INC.

## Current Principal Place of Business:

215 F WEST MAIN ST.  
IMMOKALEE, FL 34143

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 603  
IMMOKALEE, FL 34143

## New Mailing Address:

FEI Number: 33-1067943

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DANIEL, JULIA  
2111 VINSON AVE.  
MIAMI, FL 34232 US

## Name and Address of New Registered Agent:

SELLERS, RANDALL  
1107 NEW MARKET ROAD  
IMMOKALEE, FL 34142 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: RANDALL SELLERS

01/06/2005

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: CHAVEZ, GERARDO  
Address: 215 F WEST MAIN ST.  
City-St-Zip: IMMOKALEE, FL 34143

Title: D ( ) Delete  
Name: CORTEZ, FRANCISCA  
Address: 215 F WEST MAIN ST.  
City-St-Zip: IMMOKALEE, FL 34143

Title: D ( ) Delete  
Name: PAYNE, BRIAN  
Address: 215 F WEST MAIN ST.  
City-St-Zip: IMMOKALEE, FL 34143

Title: D ( ) Delete  
Name: GONZALEZ, MELODY  
Address: 844 PASQUERRILLA EAST  
City-St-Zip: SOUTH BEND, IN 46556

Title: D ( ) Delete  
Name: DAMARA, LUZ  
Address: 1109 NEW MARKET RD  
City-St-Zip: IMMOKALEE, FL 34143

Title: D ( ) Delete  
Name: GYNTHIER, BRIGITTE  
Address: 1109 NEW MARKET RD  
City-St-Zip: IMMOKALEE, FL 34143

## 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: D (X) Change ( ) Addition  
Name: DAMARA, LUCE  
Address: 1107 NEW MARKET RD  
City-St-Zip: IMMOKALEE, FL 34142

Title: D (X) Change ( ) Addition  
Name: GYNTHIER, BRIGITTE  
Address: 1107 NEW MARKET RD  
City-St-Zip: IMMOKALEE, FL 34142

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: BRIGITTE GYNTHIER

MS.

01/06/2005

Electronic Signature of Signing Officer or Director

Date