

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000001982

FILED
Feb 16, 2009
Secretary of State

Entity Name: NCU ALUMNI ASSOCIATION - CENTRAL FLORIDA CHAPTER, INC.

Current Principal Place of Business:

C/O VILMA CAMPBELL
3465 ROLLING HILLS LANE
APOPKA, FL 32712

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 683275
ORLANDO, FL 32808

New Mailing Address:

POST OFFICE BOX 683275
ORLANDO, FL 32868

FEI Number: 02-0683640

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DALEY, EVERARD A
124 MARCIA DRIVE
ALTAMONTE SPRINGS, FL 32714 US

Name and Address of New Registered Agent:

DALEY, EVERARD A MR.
124 MARCIA DRIVE
ALTAMONTE SPRINGS, FL 32714 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: EVERARD A. DALEY

02/16/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: ROBINSON, DR. BYRON
Address: 3943 ROCK HILL LANE
City-St-Zip: APOPKA, FL 32712

Title: S () Delete
Name: CROOKS, JEAN
Address: 421 PINTA PLACE
City-St-Zip: LONGWOOD, FL 32750

Title: V () Delete
Name: DALEY, EVERARD A
Address: 124 MARCIA DRIVE
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: VP () Delete
Name: MCCLYMONT, NICOLA
Address: 365 WILLET AVENUE
City-St-Zip: APOPKA, FL 32703

Title: P () Delete
Name: CAMPBELL, VILMA
Address: 3465 ROLLING HILL LANE
City-St-Zip: APOPKA, FL 32712

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: ROBINSON, BYRON DR.
Address: 3943 ROCK HILL LANE
City-St-Zip: APOPKA, FL 32712

Title: S (X) Change () Addition
Name: SERVICE, MONICA MRS.
Address: 1008 BLUE SPRUCE DRIVE
City-St-Zip: OCOEE, FL 34761

Title: V (X) Change () Addition
Name: DALEY, EVERARD A MR.
Address: 124 MARCIA DRIVE
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: VP (X) Change () Addition
Name: MCCLYMONT, NICOLA MRS.
Address: 365 WILLET AVENUE
City-St-Zip: APOPKA, FL 32703

Title: P (X) Change () Addition
Name: CAMPBELL, VILMA MRS.
Address: 3465 ROLLING HILL LANE
City-St-Zip: APOPKA, FL 32712

Title: VP () Change (X) Addition
Name: ALTON, MARSHALLECK MR.
Address: 1179 COUNTRY WIND DRIVE
City-St-Zip: APOPKA, FL 32703

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: EVERARD A. DALEY

VP

02/16/2009

Electronic Signature of Signing Officer or Director

Date