

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000004288

FILED
Mar 10, 2009
Secretary of State

Entity Name: EAST BAY HIGH SCHOOL ALUMNI ASSOCIATION, INC.

Current Principal Place of Business:

11541 MONETTE ROAD
RIVERVIEW, FL 33569

New Principal Place of Business:

Current Mailing Address:

PO BOX 3022
RIVERVIEW, FL 33568

New Mailing Address:

FEI Number: 05-0573514

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

KILLEBREW, ALBERTA
11541 MONETTE ROAD
RIVERVIEW, FL 33569 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: D () Delete
Name: HAGIN KRESS, MARY L
Address: 22600 ST RD 60 E
City-St-Zip: LAKE WALES, FL 33898

Title: PD () Delete
Name: KILLEBREW, ALBERTA L
Address: 11541 MONETTE ROAD
City-St-Zip: RIVERVIEW, FL 33569

Title: D () Delete
Name: BARBOUR, JUNE S
Address: 1709 OAKWOOD LANE WEST
City-St-Zip: PLANT CITY, FL 33563

Title: D () Delete
Name: FRANKLIN, JAMES
Address: 515 APOLLO BEACH BLVD
City-St-Zip: APOLLO BEACH, FL 33572

Title: D/T () Delete
Name: HEREFORD, FRANCES
Address: 3623 GAVIOTA DR.
City-St-Zip: SUN CITY CENTER, FL 33573

Title: VPD () Delete
Name: PEASE, LEONARD
Address: 7123 E 13TH ST.
City-St-Zip: SARASOTA, FL 34243

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: T (X) Change () Addition
Name: KILLEBREW, ALBERTA L
Address: 11541 MONETTE ROAD
City-St-Zip: RIVERVIEW, FL 33569

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

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

Title: D (X) Change () Addition
Name: HEREFORD, FRANCES
Address: 3623 GAVIOTA DR.
City-St-Zip: SUN CITY CENTER, FL 33573

Title: P (X) Change () Addition
Name: PEASE, LEONARD
Address: 7123 E 13TH ST.
City-St-Zip: SARASOTA, FL 34243

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: ALBERTA L. KILLEBREW

T

03/10/2009

Electronic Signature of Signing Officer or Director

Date