

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000005449

FILED
Apr 18, 2009
Secretary of State

Entity Name: B.T.W. CLASS OF 1957 FOUNDATION, INC.

Current Principal Place of Business:

16120 SW 107TH PLACE
MIAMI, FL 33157

New Principal Place of Business:

Current Mailing Address:

10200 SW 140 ST
MIAMI, FL 33176

New Mailing Address:

FEI Number: 65-1194376

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBINSON, DAVID II
10200 SW 140 STREET
MIAMI, FL 33176 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: PCEO () Delete
Name: GLOVER, JOHN
Address: 12735 STONEBROOK DRIVE
City-St-Zip: DAVIE, FL 33330

Title: AT () Delete
Name: MATHIS, DELORES
Address: 5300 CLEVELAND STREET
City-St-Zip: HOLLYWOOD, FL 33021

Title: VP () Delete
Name: MICKEY, CARRIE BRYANT
Address: 16120 SW 107TH PLACE
City-St-Zip: MIAMI, FL 33157

Title: GC () Delete
Name: ROBINSON, DAVID II
Address: 10200 SW 140TH STREET
City-St-Zip: MIAMI, FL 33176

Title: T () Delete
Name: PERKINS, WALTER
Address: 8015 NW 21 AVENUE
City-St-Zip: MIAMI, FL 33147

Title: S () Delete
Name: BURKE, PERNELLA
Address: 1380 NW 96 STREET
City-St-Zip: MIAMI, FL 33147

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
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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: JOHN GLOVER

PCEO

04/18/2009

Electronic Signature of Signing Officer or Director

Date