

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000003800

FILED
Jan 15, 2007
Secretary of State

Entity Name: AZEZO DIMAZA SCHOOLS ALUMNI ASSOCIATION, INC.

Current Principal Place of Business:

PO BOX 422321
KISSIMMEE, FL 347422321 US

New Principal Place of Business:

3286 FALCON POINT DR
KISSIMMEE, FL 34741 US

Current Mailing Address:

PO BOX 422321
KISSIMMEE, FL 347422321 US

New Mailing Address:

FEI Number: 01-0812322 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRUMER, BARRY N ESQ.
5728 MAJOR BOULEVARD
SUITE 545
ORLANDO, FL 32819 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: TD () Delete
Name: BELAY, ZENEBE
Address: 3286 FALCON POINT DRIVE
City-St-Zip: KISSIMMEE, FL 34741

Title: SD () Delete
Name: MULUGETA, DAWIT
Address: 216 PW REED ROAD
City-St-Zip: ATOKA, TN 38004

Title: OD () Delete
Name: TEKELEBERHAN, GEBRU
Address: 1406 GEBRIEL PL
City-St-Zip: BRANDON, FL 33511

Title: PD () Delete
Name: AHMED, DEJENE
Address: 111 MORGAN STREET
City-St-Zip: RANDOLPH, MA 02368

Title: VPD () Delete
Name: AZENE, ABRHAM
Address: 4210 WITHERSPOON AVE.
City-St-Zip: PENNSAUKEN, NJ 08109

Title: AUD () Delete
Name: TEFERA, SENAIT
Address: 118 HEATHER DRIVE
City-St-Zip: MT. LAUREL, NJ 08054

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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Name:
Address:
City-St-Zip:

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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 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: ZENEBE BELAY

TD

01/15/2007

Electronic Signature of Signing Officer or Director

Date