

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000003800

FILED  
May 20, 2009  
Secretary of State

**Entity Name:** AZEZO DIMAZA SCHOOLS ALUMNI ASSOCIATION, INC.

**Current Principal Place of Business:**

3286 FALCON POINT DR  
KISSIMMEE, FL 34741 US

**New Principal Place of Business:**

**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 ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**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:

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:

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: ZENEBE BELAY

TD

05/20/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date