

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000005630

FILED  
Apr 08, 2008  
Secretary of State

**Entity Name:** JAMAICA COLLEGE OLD BOYS ASSOCIATION OF FLORIDA, INC.

**Current Principal Place of Business:**

17944 SW 33RD COURT  
MIRAMAR, FL 33029

**New Principal Place of Business:**

**Current Mailing Address:**

17944 SW 33RD COURT  
MIRAMAR, FL 33029

**New Mailing Address:**

6480 NW 41ST TERRACE  
COCONUT CREEK, FL 33073 US

**FEI Number:** 11-3721039

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MCPHERSON, CONRAD A  
6480 NW 41ST TERRACE  
COCONUT CREEK, FL 33073 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: P ( ) Delete  
Name: ALEXANDER, EDWARD C  
Address: 827 HANDINA DRIVE  
City-St-Zip: WESTON, FL 33327

Title: VP ( ) Delete  
Name: BROWN, DON  
Address: 1249 CAMELLIA LANE  
City-St-Zip: WESTON, FL 33326

Title: S ( ) Delete  
Name: BUDALL, MICHAEL A  
Address: 6150 SW 153 RD COURT  
City-St-Zip: MIAMI, FL 33193

Title: T ( ) Delete  
Name: MCPHERSON, CONRAD A  
Address: 6480 NW 41ST TERRACE  
City-St-Zip: COCONUT CREEK, FL 33073

Title: VP (X) Delete  
Name: DIXON, DONNY  
Address: 7942 PINES BLVD  
City-St-Zip: PEMBROKE PINES, FL 33024

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: ALEXANDER, EDWARD C  
Address: 1600 HARBOURSIDE DRIVE  
City-St-Zip: WESTON, FL 33326

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: CONRAD A. MCPHERSON

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04/08/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date