

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000010768

FILED
Mar 05, 2009
Secretary of State

Entity Name: MAYS HIGH, CLASS OF '66-SUPERLATIVES, INC.

Current Principal Place of Business:

14415 S.W. 106TH CT.
MIAMI, FL 33176

New Principal Place of Business:

Current Mailing Address:

14415 S.W. 106TH CT.
MIAMI, FL 33176

New Mailing Address:

FEI Number: 77-0643376

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BELLE, RICHARD J
14415 S.W. 106TH CT.
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: P () Delete
Name: BELLE, RICHARD J
Address: 14415 S.W. 106TH CT.
City-St-Zip: MIAMI, FL 33176

Title: V () Delete
Name: BULLARD, JOHN
Address: P.O. BOX 120053
City-St-Zip: FT. LAUDERDALE, FL 33312

Title: V () Delete
Name: MERRELL, BRUCE
Address: 16601 S.W. 105 AVE.
City-St-Zip: MIAMI, FL 33157

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:

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: RICHARD J. BELLE

P

03/05/2009

Electronic Signature of Signing Officer or Director

Date