

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000003684

FILED
Mar 19, 2008
Secretary of State

Entity Name: MASTERPIECE ALLIANCE FOUNDATION, INC.

Current Principal Place of Business:

3801 PGA BLVD - UNIT 805
PALM BEACH GARDENS, FL 33410

New Principal Place of Business:

Current Mailing Address:

3801 PGA BLVD - UNIT 805
PALM BEACH GARDENS, FL 33410

New Mailing Address:

FEI Number: 20-2661285

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LANDRY, LAWRENCE L
3801 PGA BLVD - UNIT 805
PALM BEACH GARDENS, FL 33410 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: PD () Delete
Name: LANDRY, ROGER MD.MPH
Address: 120 UPPER DEMUNDS RD
City-St-Zip: DALLAS, PA 18612

Title: D () Delete
Name: KAHN, ROBERT PH D
Address: % UNIVERSITY OF MI - P O BOX 12348
City-St-Zip: ANN ARBOR, MI 48106

Title: CD () Delete
Name: LANDRY, LAWRENCE L
Address: %WESTPORT ADVISORS - 3801 PGA BLVD-STE 805
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: ST () Delete
Name: ROSSER, SUSAN
Address: %WESTPORT ADVISORS - 3801 PGA BLVD-STE 805
City-St-Zip: PALM BEACH GARDENS, FL 33410

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:

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: LAWRENCE L LANDRY

CD

03/19/2008

Electronic Signature of Signing Officer or Director

Date