

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000006133

FILED
Jul 18, 2008
Secretary of State

Entity Name: ATTUCKS HIGH SCHOOL ALUMNI ASSOCIATION, INC.

Current Principal Place of Business:

3500 NORTHWEST 22ND AVE
HOLLYWOOD, FL 33020

New Principal Place of Business:

Current Mailing Address:

PO BOX 133
DANIA BEACH, FL 33004

New Mailing Address:

FEI Number: 26-0327403 **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:

THOMAS, RAYMOND
5621 NW 13TH COURT
FORT LAUDERDALE, FL 33312 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: DP () Delete
Name: THOMAS, RAYMOND
Address: 5621 NW 13TH COURT
City-St-Zip: LAUDERHILL, FL 33313

Title: DV () Delete
Name: HARDGE, JOHNNY
Address: 5858 NORHTWEST 62 TERRACE
City-St-Zip: PARKLAND, FL 33067

Title: DS () Delete
Name: GRISBY, JOYCE
Address: 725 SW 4TH TERRACE
City-St-Zip: DANIA BEACH, FL 33004

Title: DT () Delete
Name: PENN, LUCYE
Address: 754 SW 3RD STREET
City-St-Zip: DANIA, FL 33004

Title: DS () Delete
Name: CUNNINGHAM, GWENDOLYN
Address: 4790 SOUTHWEST 26 STREET
City-St-Zip: WEST HOLLYWOOD, FL 33020

Title: DT () Delete
Name: DARVILLE, CATHERINE
Address: 2226 GREENE STREET
City-St-Zip: HOLLYWOOD, FL 33020

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DV (X) Change () Addition
Name: BROWN, MCARTHUR
Address: 720 BRIARWOOD TERRACE
City-St-Zip: DAVIE, FL 33325

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: LUCYE PENN

DT

07/18/2008

Electronic Signature of Signing Officer or Director

Date