

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000003608

FILED
Feb 16, 2010
Secretary of State

Entity Name: NMCB FOURTEEN ALUMNI ASSOCIATION, INC.

Current Principal Place of Business:

4515 FIELDCREST CIRCLE
CAMPBELLTON, FL 32426 US

New Principal Place of Business:

Current Mailing Address:

4515 FIELDCREST CIRCLE
CAMPBELLTON, FL 32426 US

New Mailing Address:

FEI Number: 20-5719258

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHWEIGART, JOSEPH A
7870 SIENNA SPRINGS DRIVE
LAKE WORTH, FL 33463 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
Name: HELTON, RONALD I P
Address: 1220 FAIRWINDS DR
City-St-Zip: LOGANVILLE, GA 30052

Title: VP
Name: BUSHEY, RANDALL K VP
Address: 13140 A QUIET WOODS RD
City-St-Zip: WELLINGTON, FL 33414

Title: S
Name: BOSSARD, FRED S
Address: 4005 CREST VIEW DR
City-St-Zip: STROUDSBURG, PA 18360

Title: D
Name: PURKIS, WILLIAM
Address: 1788 SW COUNTY RD 769
City-St-Zip: ARCADIA, FL 342338593

Title: D
Name: SMITH, GLENN
Address: 5406 BAY LA LAUNCH AVENUE
City-St-Zip: ORANGE BEACH, AL 36561

Title: T
Name: MANNING, GEORGE A
Address: 4515 FIELDCREST CIRCLE
City-St-Zip: CAMPBELLTON, FL 32426

I hereby 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 all other like empowered.

SIGNATURE: GEORGE A MANNING

T

02/16/2010

Electronic Signature of Signing Officer or Director

Date