2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2009
Secretary of State

DOCUMENT# N06000006747

Entity Name: THE MIDDLETON HIGH ALUMNI CLASS OF 1963, INC.

Current Principal Place of Business:

P. O. BOX 16672
TAMPA, FL 33687

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 16672
TAMPA, FL 33687

New Mailing Address:

FEI Number: 65-1282415 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SMITH, JERALDINE W
2504 E. 12TH AVE.
TAMPA, FL 336054039 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:	BRINSON, JESSE	
Address:	4821 ASHLAND DR.	
City-St-Zip:	TAMPA, FL 33610	
Title:	VD	( ) Delete
Name:	SHAW, GEORGE E	
Address:	328 DORSETT AVE.	
City-St-Zip:	LAKE WALES, FL 33853	
Title:	T	( ) Delete
Name:	WILLIAMS, SHIRLEY G	
Address:	107 E. EUCLID AVE.	
City-St-Zip:	TAMPA, FL 33602	
Title:	D	( ) Delete
Name:	DENNARD, EMMA T	
Address:	10216 JOE EBERT RD.	
City-St-Zip:	SEFFNER, FL 33584	
Title:	D	( ) Delete
Name:	PORTER, ELLA F	
Address:	7117 N. WHITTIER ST.	
City-St-Zip:	TEMPLE TERRACE, FL 33617	

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:	
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: JESSE BRINSON PD 04/23/2009

Electronic Signature of Signing Officer or Director — Date