

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000000112

FILED
Jan 06, 2009
Secretary of State

Entity Name: CALABAR HIGH SCHOOL ALUMNI, (FLORIDA CHAPTER) INC.

Current Principal Place of Business:

12031 SW 192 TERRACE
MIAMI, FL 33177

New Principal Place of Business:

17149 NW 10TH STREET
PEMBROKE PINES, FL 33028

Current Mailing Address:

PO BOX 524297
MIAMI, FL 331524297

New Mailing Address:

PO BOX 190550
LAUDERHILL, FL 33319

FEI Number: 30-0398305

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAMPBELL, EDMUND X
12031 SW 192 TERRACE
MIAMI, FL 33177 US

Name and Address of New Registered Agent:

STREETE, DOUGLAS
17149 NW 10TH STREET
PEMBROKE PINES, FL 33028 US

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: DOUGLAS STREETE

01/06/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: CAMPBELL, EDMUND X
Address: 12031 SW 192 TERRACE
City-St-Zip: MIAMI, FL 33177

Title: DVP () Delete
Name: SCHLOSS, MICHAEL
Address: 2800 NW 56 AVENUE
City-St-Zip: LAUDERHILL, FL 33313

Title: DT () Delete
Name: MCCALLA, MICHAEL
Address: 1876 N UNIVERSITY DRIVE 101T
City-St-Zip: PLANTATION, FL 33322

Title: DS () Delete
Name: STENNETT, CHRISTOPHER
Address: 6165 SW 32 STREET
City-St-Zip: MIRAMAR, FL 33023

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: SCHLOSS, MICHAEL
Address: 2800 NW 56 AVENUE
City-St-Zip: LAUDERHILL, FL 33313

Title: DVP (X) Change () Addition
Name: MCCALLA, MICHAEL
Address: 4340 NW 6 CT.
City-St-Zip: PLANTATION, FL 33317

Title: DT (X) Change () Addition
Name: STREETE, DOUGLAS
Address: 17149 NW 10TH STREET
City-St-Zip: PEMBROKE PINES, FL 33028

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: DOUGLAS STREETE

DT

01/06/2009

Electronic Signature of Signing Officer or Director

Date