2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2009
Secretary of State

DOCUMENT# N07000001394

Entity Name: DILLARD HIGH-CLASS OF 1958, INC.

Current Principal Place of Business:

610 NW 35 TERRACE
FT. LAUDERDALE, FL 33311

New Principal Place of Business:

Current Mailing Address:

610 NW 35 TERRACE
FT. LAUDERDALE, FL 33311

New Mailing Address:

FEI Number: 65-1296489 **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:

WRIGHT, WILLIAM D.
2525 NW 9 CT.
FT. LAUDERDALE, FL 33311 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: BLACK, ANGEANETTE C.
Address: 3057 NW 20 ST.
City-St-Zip: FT. LAUDERDALE, FL 33311

Title: DV ( ) Delete
Name: WILLIAMS, MCKINLEY
Address: 7220 NW 6TH CT.
City-St-Zip: PLANTATION, FL 33317

Title: DS ( ) Delete
Name: WRIGHT, LOUISE L.
Address: 610 NW 35 TERRACE
City-St-Zip: FT. LAUDERDALE, FL 33311

Title: DT ( ) Delete
Name: ROBINSON, GLORIA C.
Address: 3730 NW 4TH ST.
City-St-Zip: FT. LAUDERDALE, FL 33311

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: GLORIA M. ROBINSON DT 05/01/2009

Electronic Signature of Signing Officer or Director — Date