

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N07000003105

**FILED**  
**Jan 05, 2010**  
**Secretary of State**

**Entity Name:** MIAMI CENTRAL ROCKETS ALUMNI ASSOCIATION, INC

**Current Principal Place of Business:**

12001 NW 12TH PLACE  
MIAMI, FL 33167

**New Principal Place of Business:**

**Current Mailing Address:**

12001 NW 12TH PLACE  
MIAMI, FL 33167

**New Mailing Address:**

**FEI Number:** 20-8733545

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

SHEFFIELD, RENAE  
12001 NW 12TH PLACE  
MIAMI, FL 33167 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:** CLARK, WILLIAM  
**Address:** 1155 NW 126TH STREET  
**City-St-Zip:** MIAMI, FL 33167

**Title:** V  
**Name:** JACKSON, SANDRA  
**Address:** 3499 NW 201 STREET  
**City-St-Zip:** MIAMI, FL 33056

**Title:** T  
**Name:** FINNIE, DARRON  
**Address:** 17201 NW 42ND PLACE  
**City-St-Zip:** MIAMI, FL 33055

**Title:** TS  
**Name:** SHEFFIELD, RENAE  
**Address:** 12001 NW 12TH PLACE  
**City-St-Zip:** MIAMI, FL 33167

**Title:** S  
**Name:** HARRIS, TERESE  
**Address:** 6951 SW 15 ST  
**City-St-Zip:** PEMBROKE PINES, FL 33023

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:** RENAE SHEFFIELD

TS

01/05/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date