2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000011911

FILED Sep 02, 2009 Secretary of State

Entity Name: USCHOOL CREW PARENTS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

2111 NE 211 STREET 14 N.E. 1ST AVENUE MIAMI, FL 33179 PENTHOUSE

MIAMI, FL 33132

Current Mailing Address: New Mailing Address:

 2111 NE 211 STREET
 14 N.E. 1ST AVENUE

 MIAMI, FL 33179
 PENTHOUSE

 MIAMI, FL 33132

FEI Number: 26-1624988 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: Name and Address of New Registered Agent:

ROBIN, SUSAN K
2255 GLADES ROAD SUITE 340W
BOCA RATON, FL 33431 US
SOLOFF, STACEY F
14 N.E. 1ST AVENUE
PENTHOUSE
MIAMI, FL 33132 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: STACEY F. SOLOFF 09/02/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: S () Delete Title: S (X) Change () Addition

 Name:
 ROBIN, SUSAN K
 Name:
 SOLOFF, STACEY F

 Address:
 2111 NE 211 STREET
 Address:
 340 ALEXANDRA CIRCLE

 City-St-Zip:
 MIAMI, FL 33179
 City-St-Zip:
 WESTON, FL 33326

Title: DV () Delete Title: DV (X) Change () Addition

 Name:
 NICHOLS, SARA
 Name:
 ZIMMER, NANCY

 Address:
 2637 OKEECHOBEE LANE
 Address:
 415 SABAL WAY

 City-St-Zip:
 FT LAUDERDALE, FL 33312
 City-St-Zip:
 WESTON, FL 33326

Title: DP () Delete Title: () Change () Addition

 Name:
 WELDON, RAY
 Name:

 Address:
 809 SW 9 ST
 Address:

 City-St-Zip:
 FORT LAUDERDALE, FL 33315
 City-St-Zip:

 Name:
 WENDER, SHARON
 Name:
 BOWLING, DAWN

 Address:
 10532 KESTREL ST
 Address:
 3727 SARATOGA LANE

 City-St-Zip:
 PLANTATION, FL 33324
 City-St-Zip:
 DAVIE, FL 33328

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: STACEY F. SOLOFF S 09/02/2009