

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07111

FILED
Apr 27, 2007
Secretary of State

Entity Name: DE LA SALLE ALUMNI ASSOCIATION, INC.

Current Principal Place of Business:

9600 S.W. 8TH STREET.
#26
MIAMI, FL 33174

New Principal Place of Business:

3601 S MIAMI AVE
SOUTH MIAMI, FL 33133

Current Mailing Address:

9600 S.W. 8TH STREET.
#26
MIAMI, FL 33174

New Mailing Address:

3601 S MIAMI AVE
ANTIGUOS ALUMNOS DLS OFFICE
COCONUT GROVE, FL 33174

FEI Number: 65-0056973

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GONZALEZ-PORTUNDO, JULIO
8299 CORAL WAY
MIAMI, FL 33155 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: VP () Delete
Name: ALVARINO, JOSE
Address: 5911 SW 93 PL
City-St-Zip: MIAMI, FL 33173

Title: PD () Delete
Name: GONZALEZ-PORTUONDO, JULIO
Address: 8299 CORAL WAY
City-St-Zip: MIAMI, FL 33155

Title: S () Delete
Name: PASTOR, DE LA TE JERA
Address: 2311 S.W. 23RD STREET
City-St-Zip: MIAMI, FL 33145

Title: T () Delete
Name: ALVARADO, DIEGO N
Address: 980 N.W. 135TH STREET
City-St-Zip: MIAMI, FL 33168

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ARELLANO, JOSE MARIA
Address: 921 ANASTASIA AVENUE
City-St-Zip: CORAL GABLES, FL 33134

Title: VD (X) Change () Addition
Name: CHAPELLI, ARMANDO
Address: 798 RIDGEWOOD RD
City-St-Zip: KEY BISCAYNE, FL 33149

Title: S (X) Change () Addition
Name: BARREDO, JOSE RAMON
Address: 19641 NW 83 AVENUE
City-St-Zip: MIAMI, FL 33015

Title: T (X) Change () Addition
Name: BESTARD, JOSE RAMON
Address: 6101 BARCELONA DR.
City-St-Zip: MIAMI SPRINGS, FL 33166

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: JOSE MARIA ARELLANO

PRES

04/27/2007

Electronic Signature of Signing Officer or Director

Date