## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N07111

FILED Mar 05, 2009 Secretary of State

Entity Name: DE LA SALLE ALUMNI ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 3601 S MIAMI AVE SOUTH MIAMI, FL 33133 **Current Mailing Address: New Mailing Address:** 3601 S MIAMI AVE ANTIGUOS ALUMNOS DLS OFFICE COCONUT GROVE, FL 33174 FEI Number: 59-2566800 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: GONZALEZ-PORTUNDO, JULIO 8299 CORAL WAY MIAMI, FL 33155 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition ARELLANO, JOSE MARIA Name: Name: 921 ANASTASIA AVENUE Address: Address: City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip: Title: VD () Delete Title: VD (X) Change ( ) Addition CHAPELLI, ARMANDO Name: BESTARD, JOSE Name: Address: 798 RIDGEWOOD RD Address: 6101 NW 40 TERRACE City-St-Zip: KEY BISCAYNE, FL 33149 City-St-Zip: VIRGINIA GARDENS, FL 33166 Title: () Delete Title: SD (X) Change ( ) Addition BARREDO, JOSE RAMON MORE, ARMANDO Name: Name: 19641 NW 83 AVENUE Address: Address: 1801 FERNINAND ST City-St-Zip: MIAMI, FL 33015 City-St-Zip: CORAL GABLES, FL 33134 Title: ( ) Delete Title: TD (X) Change ( ) Addition Name: BESTARD, JOSE MANUEL Name: FRANCO, FERNANDO 6101 BARCELONA DR. 6257 NW 113 PL Address: Address: City-St-Zip: MIAMI SPRINGS, FL 33166 City-St-Zip: DORAL, FL 33178 Title: () Delete Title: VSD ( ) Change (X) Addition ARDAVIN, CARLOS Name: Name: 7201 SW 8 ST Address: Address: City-St-Zip: City-St-Zip: MIAMI, FL 33143 Title: () Delete Title: ( ) Change (X) Addition BENITO, ROBERTO Name: Name: Address: Address: 2333 BRICKELL AVE, UNIT 207 MIAMI, FL 33129 City-St-Zip: 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: JOSE BESTARD VPD 03/05/2009