

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000010691

FILED
May 01, 2009
Secretary of State

Entity Name: NATIONAL HAMPTON ALUMNI ASSOCIATION, INC. GREATER MIAMI CHAPTER

Current Principal Place of Business:

10280 SW 156TH STREET
MIAMI, FL 33157

New Principal Place of Business:

Current Mailing Address:

10280 SW 156TH STREET
MIAMI, FL 33157

New Mailing Address:

FEI Number: 26-3560248 **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:

PARAMORE, MICHELE Y
10280 SW 156TH STREET
MIAMI, FL 33157 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 () Delete
Name: PARAMORE, MICHELE Y
Address: 10280 SW 156TH STREET
City-St-Zip: MIAMI, FL 33157

Title: VP () Delete
Name: HAMMOND, KEVIN
Address: 13870 SW 100TH LANE
City-St-Zip: MIAMI, FL 33186

Title: S () Delete
Name: KENNER, KIA
Address: 2550 SW 27TH AVE, #302
City-St-Zip: MIAMI, FL 33133

Title: T () Delete
Name: THORPE, KAY
Address: 1780 ACORN AVE
City-St-Zip: PEMBROKE PINES, FL 33326

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: MICHELE Y. PARAMORE

P

05/01/2009

Electronic Signature of Signing Officer or Director

Date