

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N21731

FILED
Apr 05, 2005
Secretary of State

Entity Name: UNITED FILIPINO AMERICAN ASSOCIATION OF PALM BEACH COUNTY, INC.

Current Principal Place of Business:

UNITED FILIPINO AMERICAN ASSOCIATION
C/O ROSARIO BARRAMEDA 1600 S DIXIE HWY
STE 107 BOCA RATON, FL 33432 US

New Principal Place of Business:

Current Mailing Address:

UNIFIL C/O ROSARIO M BARRAMEDA
1600 SOUTH DIXIE HWY STE 107
ROYAL PALM TOWERS, FL 33432 US

New Mailing Address:

FEI Number: 59-2836761 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

BARRAMEDA, ROSARIO M
16 ROYAL PALM WAY
APT 105
BOCA RATON, FL 33432 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: BARRAMEDA, ROSARIO M
Address: 1600 S DIXIE HWY STE 107
City-St-Zip: ROYAL PALM TOWERS, FL 33432 US

Title: V () Delete
Name: CALALO, ESTER
Address: 5445 THURSTON AVENUE
City-St-Zip: LAKEWORTH AVENUE, FL 33463 US

Title: T () Delete
Name: BARRAMEDA, ESTHER MD
Address: 141 ALCAZAR ST.
City-St-Zip: ROYAL PALM BEACH, FL 33411 US

Title: S () Delete
Name: CRUZ, EMMANUEL
Address: 1600 S DIXIE HWY STE 107 ROYAL PALM TOWERS
City-St-Zip: BOCA RATON, FL 33432 US

Title: D () Delete
Name: ENGLE, MYRNA
Address: 3687 HOLIDAY ROAD
City-St-Zip: PALM BEACH GARDEN, FL 33410 US

Title: D () Delete
Name: FORREST, JEANE
Address: 3000 FLORIDA BLVD.
City-St-Zip: DELRAY BEACH, FL 33483 US

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
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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 for the exemption stated in Section 119.07(3)(i), 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: ROSARIO BARRAMEDA

PRES

04/05/2005

Electronic Signature of Signing Officer or Director

Date