

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N34546

FILED
Mar 03, 2004
Secretary of State**Entity Name:** ST. ANDREW HIGH SCHOOL OLD GIRLS ASSOCIATION FLORIDA, INC.**Current Principal Place of Business:**15120 S.W. 87TH AVENUE
MIAMI, FL 33176 US**New Principal Place of Business:****Current Mailing Address:**15120 S.W. 87TH AVENUE
MIAMI, FL 33176 US**New Mailing Address:**7925 SW 86 ST
APT 901
MIAMI, FL 33143 US**FEI Number:** 65-0106976**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**PARKE, PATRICIA
11921 N W 20TH ST.
PEMBROKE PINES, FL 33026**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:** PD () Delete
Name: CRAWFORD, DANA
Address: 13253 SW 114 TERR
City-St-Zip: MIAMI, FL 33186**Title:** D () Delete
Name: RAYMOND, MARY A
Address: 16879 SW 1ST MANOR
City-St-Zip: PEBROKE PINES, FL 33027**Title:** PD () Delete
Name: TYRELL GRANT, ANDREA
Address: 18024 SW 29 COURT
City-St-Zip: MIRAMAR, FL 33029**Title:** D () Delete
Name: GRAHAM, MARGUERITE
Address: 15120 SW 87TH AVE
City-St-Zip: MIAMI, FL**Title:** VD () Delete
Name: CRAWFORD, DANA
Address: 13253 SW 114 TERRACE
City-St-Zip: MIAMI, FL 33186**Title:** SD () Delete
Name: MUIR-MALCOLM, JOAN
Address: 16796 NW 20 STREET
City-St-Zip: PEMBROKE PINES, FL 33028**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:**Title:** D (X) Change () Addition
Name: TREWICK, BARBARA G
Address: 7925 SW 86 ST APT 901
City-St-Zip: MIAMI, FL 33143**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: BARBARA TREWICK

D

03/03/2004

Electronic Signature of Signing Officer or Director

Date