2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 16, 2006
Secretary of State

DOCUMENT# N39141

Entity Name: IMMACULATE CONCEPTION HIGH SCHOOL ALUMNAE ASSOCIATION FLORIDA INCORPORATED

Current Principal Place of Business:

1633 VICTORIA POINTE LANE
WESTON, FL 33327

New Principal Place of Business:

Current Mailing Address:

1633 VICTORIA POINTE LANE
WESTON, FL 33327

New Mailing Address:

FEI Number: 65-0202548 **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:

CERA, NANCY
1633 VICTORIA POINTE LANE
WESTON, FL 33327 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:	TD	( ) Delete
Name:	CERA, NANCY	
Address:	1633 VICTORIA POINTE LANE	
City-St-Zip:	BOCA RATON, FL 33433	
Title:	PD	( ) Delete
Name:	NARCISSE, LISA	
Address:	8940 S LAKE DASHA DRIVE	
City-St-Zip:	PLANTATION, FL 33324	
Title:	SD	( ) Delete
Name:	KAKRAH, MARIE	
Address:	15840 SW 102 AVENUE	
City-St-Zip:	MIAMI, FL 33157	
Title:	VD	( ) Delete
Name:	NEITA, CARROL	
Address:	2287 SW 127 TH AVENUE	
City-St-Zip:	MIRAMAR, FL 33027	

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 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: NANCY CERA TREA 07/16/2006

Electronic Signature of Signing Officer or Director — Date