2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N39141

FILED Apr 28, 2007 Secretary of State

Entity Name: IMMACULATE CONCEPTION HIGH SCHOOL ALUMNAE ASSOCIATION FLORIDA INCORPORATED

Current Principal Place of Business: New Principal Place of Business:

1633 VICTORIA POINTE LANE WESTON, FL 33327

Current Mailing Address: New Mailing Address:

1633 VICTORIA POINTE LANE WESTON, FL 33327

FEI Number: 65-0202548 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:

CERA, NANCY 1633 VICTORIA POINTE LANE WESTON, FL 33327 US

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:

 Title:
 TD () Delete
 Title:
 SD (X) Change () Addition

 Name:
 CERA, NANCY
 Name:
 CERA, NANCY

 Address:
 1633 VICTORIA POINTE LANE
 Address:
 1633 VICTORIA POINTE LANE

 City-St-Zip:
 BOCA RATON, FL 33433
 City-St-Zip:
 BOCA RATON, FL 33433

Title: PD () Delete Title: PD (X) Change () Addition Name: NARCISSE, LISA Name: HOYES, JENNIFER

Address: 8940 S LAKE DASHA DRIVE Address: 1801 ROYAL PALM WAY
City-St-Zip: PLANTATION, FL 33324 City-St-Zip: BOCA RATON, FL 33432

Title: SD () Delete Title: TD (X) Change () Addition

 Name:
 KAKRAH, MARIE
 Name:
 FRASER, JACQUELINE

 Address:
 15840 SW 102 AVENUE
 Address:
 304 EGRET LANE

 City-St-Zip:
 MIAMI, FL 33157
 City-St-Zip:
 WESTON, FL 33327

 $\label{eq:title: VD (X) Change () Addition} \begin{picture} Title: & VD & (X) Change () Addition \\ \end{picture}$

 Name:
 NEITA, CARROL
 Name:
 HEATHER, MCINTOSH

 Address:
 2287 SW 127 TH AVENUE
 Address:
 15344 SW 21 ST

 City-St-Zip:
 MIRAMAR, FL 33027
 City-St-Zip:
 MIRAMAR, FL 33027

Title: () Delete Title: VD () Change (X) Addition

Name: Name: BRIDGET, WALDEMAR
Address: Address: 14772 69TH DR N

City-St-Zip: City-St-Zip: PALM BEACH GARDENS, FL 33418

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: NANCY CERA SD 04/28/2007