

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N39141

FILED
Mar 22, 2009
Secretary of State

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 ()

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: SD () Delete
Name: CERA, NANCY
Address: 1633 VICTORIA POINTE LANE
City-St-Zip: BOCA RATON, FL 33433

Title: PD () Delete
Name: HOYES, JENNIFER
Address: 1801 ROYAL PALM WAY
City-St-Zip: BOCA RATON, FL 33432

Title: TD () Delete
Name: FRASER, JACQUELINE
Address: 304 EGRET LANE
City-St-Zip: WESTON, FL 33327

Title: VD () Delete
Name: HEATHER, MCINTOSH
Address: 15344 SW 21 ST
City-St-Zip: MIRAMAR, FL 33027

Title: VD () Delete
Name: BRIDGET, WALDEMAR
Address: 14772 69TH DR N
City-St-Zip: PALM BEACH GARDENS, FL 33418

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: VD (X) Change () Addition
Name: HOO, DONNA
Address: 11851 NW 32ND MANOR
City-St-Zip: SUNRISE, FL 33323

Title: VD (X) Change () Addition
Name: EDWARDS, BRIDGET
Address: 18199 NW 61ST CT
City-St-Zip: MIAMI, FL 33015

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: JACQUELINE FRASER

TD

03/22/2009

Electronic Signature of Signing Officer or Director

Date