

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000005369

FILED  
Apr 10, 2008  
Secretary of State

Entity Name: BRANDON HIGH SCHOOL ALUMNI ASSOCIATION, INC.

**Current Principal Place of Business:**

1101 VICTORIA ST.  
BRANDON, FL 33510

**New Principal Place of Business:**

**Current Mailing Address:**

1101 VICTORIA ST.  
BRANDON, FL 33510

**New Mailing Address:**

FEI Number: 59-3211649

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CURRY, CLIFTON C JR.  
750 WEST LUMSDEN  
BRANDON, FL 33511 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: D ( ) Delete  
Name: SHEAROUSE PICKERN, SALLY  
Address: 4107 YELLOWWOOD DRIVE  
City-St-Zip: VALRICO, FL 33594

Title: D ( ) Delete  
Name: LOPEZ, MARVIN  
Address: 2913 FORESTWOOD DR  
City-St-Zip: SEFFNER, FL 33584

Title: D ( ) Delete  
Name: MILTNER, JEFF  
Address: 1102 LAKEMONT DR.  
City-St-Zip: VALRICO, FL 33594

Title: DP ( ) Delete  
Name: RODRIGUEZ, KAREN  
Address: 308 W. JERSEY AVE  
City-St-Zip: BRANDON, FL 33510

Title: D ( ) Delete  
Name: MARRERO, PAM  
Address: 4111 CRAGMONT DR  
City-St-Zip: TAMPA, FL 33610

Title: DVP ( ) Delete  
Name: POWELL, JAMES  
Address: 2008 CAPRI ROAD  
City-St-Zip: VALRICO, FL 33594

**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: PHILLIPS, PAM  
Address: 815 GREENBELT CIR  
City-St-Zip: BRANDON, FL 33510

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: KAREN S RODRIGUEZ

PRES

04/10/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date