

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000000758

FILED
Mar 27, 2009
Secretary of State

Entity Name: ROSENWALD HIGH SCHOOL ALUMNI REUNION, INC.

Current Principal Place of Business:

815 EAST 9TH ST
PANAMA CITY, FL 32401 US

New Principal Place of Business:

Current Mailing Address:

815 EAST 9TH ST
PANAMA CITY, FL 32401 US

New Mailing Address:

FEI Number: 59-3222760

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BATTLES, NODIE
815 EAST 9TH ST
PANAMA CITY, FL 32401 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: T () Delete
Name: BATTLES, NODIE
Address: 815 EAST 9TH ST
City-St-Zip: PANAMA CITY, FL 32401

Title: D () Delete
Name: CALDWELL, WILLIE
Address: 1248 CALDWELL DR
City-St-Zip: PANAMA CITY, FL 32401

Title: VP () Delete
Name: CAREY, BERNICE
Address: 1703 EAST 10TH ST
City-St-Zip: PANAMA CITY, FL

Title: PD () Delete
Name: KEYS, WANDA
Address: 702 HBAY AREA
City-St-Zip: PANAMA CITY, FL 32404

Title: S () Delete
Name: MINCEY, ELLERENE
Address: 8149 BETTY LOUISE DR
City-St-Zip: PANAMA CITY, FL 32401

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: () 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: WANDA KEYS

PD

03/27/2009

Electronic Signature of Signing Officer or Director

Date