

2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N94000002978

FILED
Oct 25, 2007
Secretary of State

Entity Name: THS ALUMNI ASSOCIATION, INC.

Current Principal Place of Business:

TITUSVILLE HIGH SCHOOL
TITUSVILLE, FL 32780

New Principal Place of Business:

Current Mailing Address:

150 TERRIER TRAIL
TITUSVILLE, FL 32780

New Mailing Address:

FEI Number: 59-3349249 **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:

Name and Address of New Registered Agent:

WARING, GLENDA L
23 GARNET AVENUE
TITUSVILLE, FL 32796 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: GLENDA L. WARING

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WARING, GLENDA L
Address: 23 GARNET AVENUE
City-St-Zip: TITUSVILLE, FL 32796

Title: T () Delete
Name: MERCKSON, JOE L
Address: 2940 JACARANDA TRAIL
City-St-Zip: TITUSVILLE, FL 32780

Title: D () Delete
Name: JOAN, HARPER
Address: 4850 KEY BISCAIYNE DR
City-St-Zip: TITUSVILLE, FL 32780

Title: D () Delete
Name: HENDRIX, EFFIE
Address: 1218 CRESCENT DRIVE
City-St-Zip: TITUSVILLE, FL 32796

Title: D () Delete
Name: JOAN, THRELKELD
Address: 150 TERRIER TRAIL
City-St-Zip: TITUSVILLE, FL 32780

Title: D () Delete
Name: HENDRIX, SAM
Address: 1218 CRESCENT DRIVE
City-St-Zip: TITUSVILLE, FL 32796

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:

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: GLENDA L. WARING

P

10/25/2007

Electronic Signature of Signing Officer or Director

Date