

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000006013

FILED
Mar 09, 2009
Secretary of State

Entity Name: BLANCHE ELY CLASS OF 1960, INC.

Current Principal Place of Business:

1534 NW 4TH AVE
POMPANO BEACH, FL 33060

New Principal Place of Business:

Current Mailing Address:

1534 NW 4TH AVE
POMPANO BEACH, FL 33060

New Mailing Address:

FEI Number: 65-0521348

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LARKINS, PAT
3351 N.W. 16TH ST.
FT. LAUDERDALE, FL 33311 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: JENKINS, MARVA
Address: 4940 NW 16TH ST
City-St-Zip: FORT LAUDERDALE, FL 33313

Title: VD () Delete
Name: CAMPFIELD, MINNIE
Address: 616 NW 21ST CRT
City-St-Zip: POMPANO BEACH, FL 33060

Title: TD () Delete
Name: ALLEN, LOUISE
Address: 3351 N.W. 16TH ST.
City-St-Zip: FT. LAUDERDALE, FL 33311

Title: PD () Delete
Name: LARKINS, BETTYE
Address: 1534 NW 4TH AVE
City-St-Zip: POMPANO BEACH, FL 33060

Title: D () Delete
Name: FREEMAN, GAIL
Address: 3831 NW 7TH PL
City-St-Zip: FORT LAUDERDALE, FL 33311

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: MINNIE CAMPFIELD

VP

03/09/2009

Electronic Signature of Signing Officer or Director

Date