

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N95000005332

1. Entity Name

MONTEGO BAY HIGH SCHOOL ALUMNAE ASSOCIATION OF S

FILED
May 15, 2000 8:00 am
Secretary of State

05-15-2000 90202 023 ****61.25

Principal Place of Business

1112 SW 49TH TERRACE
 PLANTATION FL 33317

Mailing Address

1112 SW 49TH TERRACE
 PLANTATION FL 33317-4421

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0626223

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HAUGHTON, LORETTA
 1112 SW 49TH TERRACE
 PLANTATION FL 33317

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Delete
 NAME P
 STREET ADDRESS HAUGHTON, LORETTA
 CITY-ST-ZIP 1112 SW 49TH TERRACE
 PLANTATION FL 33317

TITLE ☒ Change ☐ Addition
 NAME P
 STREET ADDRESS SMITH, BEVERLY
 CITY-ST-ZIP 3910 NW 175 ST
 MIAMI FL 33055

TITLE ☐ Delete
 NAME VP
 STREET ADDRESS PINTO, DOROTHY
 CITY-ST-ZIP 14821 E. TETHERCLIFT ST.
 FT. LAUDERDALE FL

TITLE ☒ Change ☐ Addition
 NAME VP
 STREET ADDRESS CURTIS, LIZ
 CITY-ST-ZIP 85 33 SW 5TH ST #10-203
 PEMBROKE PINES FL 33025

TITLE ☐ Delete
 NAME T
 STREET ADDRESS FRANCIS, ESTHER
 CITY-ST-ZIP 1311 S.W. 98 AVENUE
 PEMBROKE PINES FL 33025

TITLE ☒ Change ☐ Addition
 NAME T
 STREET ADDRESS PINTO DOROTHY
 CITY-ST-ZIP 14821 E. TETHERCLIFT ST.
 FT. LAUD. FL 33331

TITLE ☐ Delete
 NAME D
 STREET ADDRESS SMITH, BEVERLY
 CITY-ST-ZIP 3910 NW 175 ST
 MIAMI FL 33055

TITLE ☒ Change ☐ Addition
 NAME D
 STREET ADDRESS HAUGHTON, LORETTA
 CITY-ST-ZIP 1112 SW 49TH TER.
 PLANTATION. FL 33317

TITLE ☐ Delete
 NAME D
 STREET ADDRESS BARNES, BRENDA
 CITY-ST-ZIP 1070 NE 154 TR
 N. MIAMI BEACH FL 33162

TITLE ☒ Change ☐ Addition
 NAME D
 STREET ADDRESS ROBERSON, JUDITH
 CITY-ST-ZIP 4640 NW 41ST PLACE
 LAUD. LAKES. FL 33319

TITLE ☐ Delete
 NAME S
 STREET ADDRESS KELLIER, NORMA
 CITY-ST-ZIP 4501 N.W. 4 ST.
 PLANTATION FL

TITLE ☒ Change ☐ Addition
 NAME S
 STREET ADDRESS BROWN, MERLYN
 CITY-ST-ZIP 19450 NW 10TH ST.
 PEMBROKE PINES FL 33029

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/27/00 (954) 484-2170
 Date Daytime Phone #

CR2E037 (9/99)