

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000003346

FILED
Apr 11, 2005
Secretary of State

Entity Name: ST. ELIZABETH TECHNICAL HIGH SCHOOL ALUMNI ASSOCIATION OF FLORIDA, INC.

Current Principal Place of Business:

P. O. BOX 451006
SUNRISE, FL 33345

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 451006
SUNRISE, FL 33345

New Mailing Address:

FEI Number: 65-0760395

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROWE, ROSEMARIE
4278 NW 38TH AVE.
FORT LAUDERDALE, FL 33309 US

Name and Address of New Registered Agent:

ROWE, ROSEMARIE
P. O. BOX 451006
SUNRISE, FL 33345 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:

04/11/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ROWE, ROSEMARIE A
Address: 4278 NW 38TH AVE.
City-St-Zip: LAUDERDALE LAKES, FL 33319

Title: S () Delete
Name: ROBINSON, REUBEN
Address: 2201 NW 41 AVE.
City-St-Zip: LAUDERHILL, FL 33313

Title: C () Delete
Name: BROMWELL, DAWN
Address: 5515 DOGWOOD WAY
City-St-Zip: FORT LAUDERDALE, FL 33319

Title: T () Delete
Name: CROOKS, KEEBLE
Address: 5405 NW 102 AVE.
City-St-Zip: SUNRISE, FL 33351

Title: PP () Delete
Name: THOMPSON, NIGEL
Address: 64-61 NW 89 AVE.
City-St-Zip: TAMARAC, FL 33321

Title: M () Delete
Name: BANTON, MICHEAL
Address: 3420 NW 21ST AVE.
City-St-Zip: OAKLAND PARK, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ROWE, ROSEMARIE A
Address: P.O. BOX 451006
City-St-Zip: SUNRISE, FL 33345

Title: S (X) Change () Addition
Name: ROBINSON, REUBEN
Address: P.O. BOX 451006
City-St-Zip: SUNRISE, FL 33345

Title: C (X) Change () Addition
Name: BROMWELL, DAWN
Address: P.O. BOX 451006
City-St-Zip: SUNRISE, FL 33345

Title: T (X) Change () Addition
Name: CROOKS, KEEBLE
Address: P.O. BOX 451006
City-St-Zip: SUNRISE, FL 33345

Title: PP (X) Change () Addition
Name: THOMPSON, NIGEL
Address: P.O. BOX 451006
City-St-Zip: SUNRISE, FL 33345

Title: M (X) Change () Addition
Name: MAHON, VALEER
Address: P. O. BOX 451006
City-St-Zip: SUNRISE, FL 33345

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ROSEMARIE ROWE

P

04/11/2005

Electronic Signature of Signing Officer or Director

Date