

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12000002068

Entity Name: CHISHOLM HIGH ALUMNI ASSOCIATION, INC.

Current Principal Place of Business:

2889 COTTAGEVILLE STREET
DELTONA, FL 32738

Current Mailing Address:

PO BOX 2612
NEW SMYRNA BEACH, FL 32170

FEI Number: 45-1829625

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

MICHAEL, WILLIAMS
2889 COTTAGEVILLE STREET
DELTONA, FL 32738 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRES
Name WILLIAMS, MICHAEL E
Address 2889 COTTAGEVILLE STREET
City-State-Zip: DELTONA FL 32738

Title VP
Name WILLIAMS, THELMA
Address 130 INGRAM ROAD
City-State-Zip: NEW SMYRNA BEACH FL 32168

Title SEC
Name STRATTON, JACQUELINE S
Address 1213 ENTERPRISE AVENUE
City-State-Zip: NEW SMYRNA BEACH FL 32168

Title ASEC
Name WADE, DORETHA
Address 1400 JEFFERSON STREET
City-State-Zip: NEW SMYRNA BEACH FL 32168

Title CSEC
Name LAMPKIN, GWENDOLYN
Address 659 WINCHESTER STREET
City-State-Zip: DAYTONA BEACH FL 32114

Title TRES
Name MITCHELL, RUTH
Address 2029 VICTORY PALM DRIVE
City-State-Zip: EDGEWATER FL 32141

I hereby 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 all other like empowered.

SIGNATURE: MICHAEL WILLIAMS

PRESIDENT

01/26/2018

Electronic Signature of Signing Officer/Director Detail

Date