

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04000004125

**Entity Name:** ALPHA PEARL FOUNDATION, INC.

**Current Principal Place of Business:**

3487 S. FEDERAL HIGHWAY  
APT H  
BOYNTON BEACH, FL 33435

**FILED**  
**Feb 12, 2020**  
**Secretary of State**  
**6060021384CC**

**Current Mailing Address:**

PO BOX 3523  
BOYNTON BEACH, FL 33424 US

**FEI Number: 45-0532679**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

PIERRE, PIA M.  
3487 S. FEDERAL HIGHWAY  
APT H  
BOYNTON BEACH, FL 33435 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: PIA M. PIERRE**

**02/12/2020**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            PIERRE, PIA M  
Address        3487 S. FEDERAL HIGHWAY  
                  APT H  
City-State-Zip: BOYNTON BEACH FL 33435

Title            VP  
Name            POTTS, ANNIE JOYCE  
Address        7141 GOLDEN VIEW PLACE  
City-State-Zip: LAKE WORTH FL 33467

Title            SEC  
Name            GUERRIER, SHONDRICA  
Address        615 WATERSIDE DR  
City-State-Zip: HYPOLUXO FL 33462

Title            TREASURER  
Name            TIMS, JENNIFER B  
Address        4276 WOKKER DR  
City-State-Zip: LAKE WORTH FL 33467

Title            FS  
Name            OWENS, MAUREEN MARVA  
Address        4960 BOXWOOD CIRCLE  
City-State-Zip: BOYNTON BEACH FL 33436

Title            OTHER  
Name            POWELL, WHITNEY BALDWIN  
Address        106 ROBBINS DR  
City-State-Zip: WEST PALM BEACH FL 33409

Title            MEMBER AT LARGE  
Name            GUERRIER, WIEHTANIA  
Address        2816 NW 80TH AVE  
City-State-Zip: SUNRISE FL 33322

*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: JENNIFER B. TIMS**

**TREASURER**

**02/12/2020**

Electronic Signature of Signing Officer/Director Detail

Date