

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05000004469

**Entity Name:** UNIVERSITY OF THE COMMONWEALTH CARIBBEAN FOUNDATION - U.S., INC. (UCCF)

**FILED**  
**Apr 29, 2022**  
**Secretary of State**  
**5178795420CC**

**Current Principal Place of Business:**

8077 SUMMER BAY CT  
JACKSONVILLE, FL 32256

**Current Mailing Address:**

8077 SUMMER BAY CT  
JACKSONVILLE, FL 32256

**FEI Number: 06-1746554**

**Certificate of Status Desired: Yes**

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

GAYLE, DENNIS J PHD  
8077 SUMMER BAY COURT  
JACKSONVILLE, FL 32256 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: DENNIS J. GAYLE, PHD**

**04/29/2022**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR  
Name ADAMS, GERALDINE MRS.  
Address 9 NORBROOK WAY  
City-State-Zip: KINGSTON 8

Title DIRECTOR  
Name MESSADO, GEOFFREY MR.  
Address 28A BENSON AVENUE  
City-State-Zip: KINGSTON 8

Title DIRECTOR  
Name FLOWERS-CLARKE, AUDREY MRS.  
Address 10 WIDCOMBE ROAD  
City-State-Zip: KINGSTON 6

Title DIRECTOR  
Name CLARE, OD, IRWINE G MR.  
Address 243-12 149TH AVENUE  
City-State-Zip: ROSEDALE NY 11422

Title PRINCIPAL OFFICER  
Name GAYLE, DENNIS JOHN PHD  
Address 8077 SUMMER BAY COURT  
City-State-Zip: JACKSONVILLE FL 32256

*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: DENNIS JOHN GAYLE**

**PRINCIPAL OFFICER**

**04/29/2022**

Electronic Signature of Signing Officer/Director Detail

Date