2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 18, 2014
Secretary of State
CC9076543744

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Entity Name: THE CARIBBEAN AMERICAN ASSOCIATION OF LAKE COUNTY, INC.

Current Principal Place of Business:

310 ALMOND STREET
CLERMONT, FL 34711

Current Mailing Address:

P.O. BOX 120580
CLERMONT, FL 34712 US

FEI Number: 71-1005993

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

THOMPSON, MILTON L
1014 WILLOW OAK LOOP
MINNEOLA, FL 34715 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	P
Name	THOMPSON, MILTON
Address	1014 WILLOW OAK LOOP
City-State-Zip:	MINNEOLA FL 34715

Title	VP
Name	THOMAS, LLOYD
Address	370 ROB ROY DR
City-State-Zip:	CLERMONT FL 34711

Title	D
Name	CAMPBELL, NEVILLE N
Address	1431 LAKEMIST LN
City-State-Zip:	CLERMONT FL 34711

Title	D
Name	POWELL, BASIL
Address	1701 TURNSTONE WAY
City-State-Zip:	CLERMONT FL 34711

Title	D
Name	COPELAND, JENNIFER
Address	332 ANORAK ST
City-State-Zip:	GROVELAND FL 34736

Title	D
Name	RILEY, MARSHA
Address	10238 DOVEHILL LN
City-State-Zip:	CLERMONT FL 34711

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: MARSHA RILEY TREASURER 03/18/2014

Electronic Signature of Signing Officer/Director Detail — Date