

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000011528

FILED
Mar 23, 2014
Secretary of State
CC2517141318

Entity Name: THE POWER OF DIVERSITY MENTORSHIP EXCHANGE PROGRAM INC.

Current Principal Place of Business:

THE CENTRE- 9900 STIRLING ROAD
SUITE 408
COOPER CITY, FL 33024

Current Mailing Address:

THE CENTRE- 9900 STIRLING ROAD
SUITE 408
COOPER CITY, FL 33024 US

FEI Number: 26-4423492

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CARTER, NICOLE LMS.
THE CENTRE- 9900 STIRLING ROAD
SUITE 408
COOPER CITY, FLORIDA, FL 33024 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 CARTER, NICOLE LMS.
Address THE CENTRE- 9900 STIRLING ROAD,
SUITE 408
City-State-Zip: COOPER CITY FL 33024

Title DIR
Name BRODERICK, HERBERT TMR.
Address THE CENTRE- 9900 STIRLING ROAD,
SUITE 408
City-State-Zip: COOPER CITY FL 33024

Title DIR
Name BETTHY, SAINT-VIL MMRS.
Address THE CENTRE- 9900 STIRLING ROAD,
SUITE 408
City-State-Zip: COOPER CITY FL 33024

Title DIR
Name BATTLE, THELMA JMS.
Address THE CENTRE- 9900 STIRLING ROAD,
SUITE 408
City-State-Zip: COOPER CITY FL 33024

Title DIR
Name BATTLE, MYLES
Address THE CENTRE-9900 STIRLING RD.,
SUITE 408
City-State-Zip: COOPER CITY FL 33024

Title DIR
Name RODRIGUEZ, LISA
Address THE CENTRE-9900 STIRLING RD.,
SUITE 408
City-State-Zip: COOPER CITY FL 33024

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: NICOLE L. CARTER

EVP

03/23/2014

Electronic Signature of Signing Officer/Director Detail

Date