

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000006475

Entity Name: MARCUS GARVEY TECHNICAL HIGH SCHOOL
ASSOCIATION, INC**Current Principal Place of Business:**6184 - D LAUREL LANE
TAMARAC, FL 33319**Current Mailing Address:**P.O BOX 190475
LAUDERHILL, FL 33319 US**FEI Number: 94-3484983****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**BROWNWEBSTER, MAXINE
6184 - D LAUREL LANE
TAMARAC, FL 33319 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 | BROWN-WEBSTER, MAXINE |
| Address | P. O. BOX 190475 |
| City-State-Zip: | LAUDERHILL FL 33319 |

| | |
|-----------------|-----------------------|
| Title | OTHER, CO FOUNDER |
| Name | BROWN, PAUL |
| Address | 8793 NW 21ST COURT |
| City-State-Zip: | CORAL SPRING FL 33071 |

| | |
|-----------------|-------------------|
| Title | SEC |
| Name | LLEWELLYN, SANDRA |
| Address | 2112 SW 101 LANE |
| City-State-Zip: | MIRAMAR FL 33025 |

| | |
|-----------------|--------------------|
| Title | VP |
| Name | PARKINSON, KEITH |
| Address | 3815 E HIBISCUS ST |
| City-State-Zip: | WESTON FL 33332 |

| | |
|-----------------|---------------------------|
| Title | TREA |
| Name | SAUNDERS, EULBERT |
| Address | 1224 S.W 71 TERR |
| City-State-Zip: | NORTH LAUDERDALE FL 33068 |

| | |
|-----------------|---------------------------|
| Title | ASST |
| Name | REID, MARCIA |
| Address | 5080 NW 39TH STREET |
| City-State-Zip: | LAUDERDALE LAKES FL 33319 |

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: MAXINE BROWN-WEBSTER**PRESIDENT****04/16/2020**_____
Electronic Signature of Signing Officer/Director Detail_____
Date