

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12000009853

Entity Name: JAMAICAN WOMEN OF FLORIDA, INC.

Current Principal Place of Business:

2335 E ATLANTIC BLVD
406
POMPANO BEACH, FL 33062

Current Mailing Address:

P.O. BOX 551677
FT LAUDERDALE, FL 33355 US

FEI Number: 46-1231798

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CREARY, HILARY A ESQ
2335 E ATLANTIC BLVD
406
POMPANO BEACH, FL 33062 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: HILARY A CREARY

04/30/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name EDWARDS, CAMILLE
Address P.O. BOX 551677
City-State-Zip: FT LAUDERDALE FL 33355

Title V
Name MINTO, JUNE
Address P.O. BOX 551677
City-State-Zip: FT LAUDERDALE FL 33355

Title SECRETARY
Name WADLEY, TAMARA
Address P.O. BOX 551677
City-State-Zip: FT LAUDERDALE FL 33355

Title T
Name TELFER, DALE
Address P.O. BOX 551677
City-State-Zip: FT LAUDERDALE FL 33355

Title DIRECTOR
Name CREARY, HILARY ESQ.
Address 2335 E ATLANTIC BLVD
406
City-State-Zip: POMPANO BEACH FL 33062

Title DIRECTOR
Name CLARKE, ANN-MARIE ESQ.
Address 4300 N UNIVERSITY DR
202
City-State-Zip: LAUDERHILL FL 33351

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: DALE TELFER

TREASURER

04/30/2018

Electronic Signature of Signing Officer/Director Detail

Date