

2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15000011425

Entity Name: MEN OF IMPACT DEVELOPMENT CENTER, INC**Current Principal Place of Business:**2275 NW 62ND STREET
MIAMI, FL 33147**Current Mailing Address:**1073 NW 121ST WAY
CORAL SPRINGS, FL 33071 US**FEI Number:** 47-5224962**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**REESE, OLDEN R
1073 NW 121ST WAY
CORAL SPRINGS, FL 33071 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:** OLDEN R REESE

04/30/2025

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PRESIDENT
Name	REESE, OLDEN ROBERT
Address	1073 NW 121ST WAY
City-State-Zip:	CORAL SPRINGS FL 33071

Title	TREASURER
Name	REESE, LASHON
Address	1073 NW 121ST WAY
City-State-Zip:	CORAL SPRINGS FL 33071

Title	SECRETARY
Name	REESE, CIERRA GOLDEN
Address	3840 NW 213TH STREET
City-State-Zip:	MIAMI GARDENS FL 33055

Title	DIRECTOR
Name	SMALL, ELISHA
Address	20 PINE CT LOOP
City-State-Zip:	OCALA FL 34472

Title	DIRECTOR
Name	MINNS, JEAN CLIFFORD
Address	1160 ALBION ST NW
City-State-Zip:	PALM BAY FL 32907

Title	DIRECTOR
Name	MERCADO, SAMUEL
Address	780 E 19TH STREET
City-State-Zip:	HIALEAH FL 33013

Title	DIRECTOR
Name	MERCADO, LUIS
Address	229 NW 43RD STREET
City-State-Zip:	MIAMI FL 33127

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: OLDEN R REESE

PRESIDENT

04/30/2025

Electronic Signature of Signing Officer/Director Detail

Date