

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16000010627

Entity Name: EASTERN NATIVE AMERICAN WORKFORCE ASSOCIATION, INC.**FILED**
Jan 21, 2020
Secretary of State
0064149142CC**Current Principal Place of Business:**625 N. ADAMS STREET
TALLAHASSEE, FL 32301**Current Mailing Address:**625 N. ADAMS STREET
TALLAHASSEE, FL 32301**FEI Number: 81-4384125****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**KATHY, ATKINS
625 N. ADAMS STREET
TALLAHASSEE, FL 32301 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: KATHY ATKINS****01/21/2020**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	CHAIRMAN
Name	WALDRON, DARRELL
Address	807 BROAD ST
City-State-Zip:	PROVIDENCE RI 02907

Title	DIRECTOR
Name	LOCKLEAR, RODRICK
Address	PO BOX 68 PROSPECT ROAD
City-State-Zip:	PEMBROKE NC 28372

Title	VC
Name	ATKINS, KATHY
Address	625 N. ADAMS STREET
City-State-Zip:	TALLAHASSEE FL 32301

Title	TREASURER
Name	WALDRON, DARRELL
Address	807 BROAD ST
City-State-Zip:	PROVIDENCE RI 02907

Title	OFFICER
Name	RICHARDSON, ANNE
Address	5036 INDIAN NECK ROAD
City-State-Zip:	INDIAN NECK VA 23148

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: DARRELL WALDRON**CHAIRMAN****01/21/2020**

Electronic Signature of Signing Officer/Director Detail

Date