

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N17000010894

**Entity Name:** CRAIG WASHINGTON MENTORING PROGRAM, INC.

**Current Principal Place of Business:**

2240 N SHERMAN CIRCLE 101  
MIRAMAR, FL 33025

**Current Mailing Address:**

2240 N SHERMAN CIRCLE 101  
MIRAMAR, FL 33025 US

**FEI Number: 82-3411445**

**Certificate of Status Desired: Yes**

**Name and Address of Current Registered Agent:**

THOMPSON, MARY P  
1324 GINSBERG DRIVE  
DAYTONA BEACH, FL 32114 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            PRESIDENT  
Name            COBBS, ELLA W  
Address        2240 N SHERMAN CIRCLE #101  
City-State-Zip: MIRAMAR FL 33025

Title            SECRETARY  
Name            JILES, CASSANDRA  
Address        700 NW 214 STREET  
City-State-Zip: MIAMI GARDENS FL 33169

Title            TREASURER  
Name            GRIFFIN, JANET  
Address        20421 NW 24TH COURT  
City-State-Zip: MIAMI GARDENS FL 33056

Title            VICE PRESIDENT  
Name            MUNAJJ, KATRINA  
Address        9925 NW 25TH AVENUE  
City-State-Zip: MIAMI FL 33147

*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: ELLA W.. COBBS**

**PRESIDENT**

**02/03/2023**

Electronic Signature of Signing Officer/Director Detail

Date