

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N19000002165

Entity Name: NOBLE ROSE VERA JEAN STYLES SUPREME MARSHAL
COUNCIL CORPORATION**Current Principal Place of Business:**4711 SOUTH HIMES AVE, #802
TAMPA, FL 33611**Current Mailing Address:**4711 SOUTH HIMES AVE, #802
TAMPA, FL 33611**FEI Number: 83-3897401****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**LEE STEVENS, ROBERT
4711 SOUTH HIMES AVE, #802
TAMPA, FL 33611 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	PAD
Name	LEE STEVENS, ROBERT
Address	4711 SOUTH HIMES AVE, #802
City-State-Zip:	TAMPA FL 33611

Title	VP
Name	WILLIAMS, MELVIN
Address	1250 BAILY AVE, #615
City-State-Zip:	BUFFALO NY 14206

Title	TREA
Name	MCMILLIAN, GWENDOLYN
Address	3826 DARTMOUTH HILL STREET
City-State-Zip:	RIVER VIEW FL 33578

Title	VP
Name	BOLDEN, LILLIAN
Address	20641 SECLUDED LAND
City-State-Zip:	SOUT FIELD MI 48075

Title	SECT
Name	ROBINSON, CHERYL
Address	11 ALBANY AVE
City-State-Zip:	JACKSON NJ 08527

Title	SEC
Name	DICK, DEBBIE
Address	6531 STANTON STREET
City-State-Zip:	DETROIT MI 48208

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: ROBERT LEE STEVENS**PRESIDENT****02/28/2020**

Electronic Signature of Signing Officer/Director Detail

Date