

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

DOCUMENT# N19000005226

**Entity Name:** EDUCATING MINORITIES ABOUT TRANSPLANTS, INC.

**Current Principal Place of Business:**

2946 PALMDALE STREET  
JACKSONVILLE, FL 32208

**Current Mailing Address:**

2946 PALMDALE STREET  
JACKSONVILLE, FL 32208 US

**FEI Number: 84-1841968**

**Certificate of Status Desired: No**

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

BRILL, SHIRLEY  
2946 PALMDALE STREET  
JACKSONVILLE, FL 32208 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: SHIRLEY S. BRILL**

**04/09/2023**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name BRILL, SHIRLEY  
Address 2946 PALMDALE STREET  
City-State-Zip: JACKSONVILLE FL 32208

Title CEO  
Name BRILL, SHIRLEY  
Address 2946 PALMDALE STREET  
City-State-Zip: JACKSONVILLE FL 32208

Title TREA  
Name MAXEY, ROSE  
Address 1131 W 31ST STREET  
City-State-Zip: JACKSONVILLE FL 32209

Title SEC  
Name PARKER, CHERYL  
Address 12212 FT CAROLINE RD  
City-State-Zip: JACKSONVILLE FL 32225

*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: SHIRLEY BRILL**

**PRESIDENT**

**04/09/2023**

Electronic Signature of Signing Officer/Director Detail

Date