2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N20000005276

Entity Name: AMINGA: YOUTH SPORTS DEVELOPMENT PROGRAM

CORPORATION

Current Principal Place of Business:

255 S CYPRESS RD 337

POMPANO BEACH, FL 33060

Current Mailing Address:

255 S CYPRESS RD

337

POMPANO BEACH, FL 33060 US

FEI Number: 85-1158100 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

GOMES, FAUZINHA 255 S CYPRESS RD

337

POMPANO BEACH, FL 33060 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:

Date Electronic Signature of Registered Agent

Officer/Director Detail:

Title **PRESIDENT** Title

Name GOMES, FAUZINHA Name GUIRAND, STEPHANIE

Address 255 S CYPRESS RD Address 67 PLEASANT STREET APT. 5

337

337

City-State-Zip: CAMBRIDGE MA 02139 POMPANO BEACH FL 33060 City-State-Zip:

Title D Title

Name GOMES, JOAO POINT DU JOUR, TASHIMA Name

255 S CYPRESS RD Address

6 GREENLEAF CRICLE Address

City-State-Zip: POMPANO BEACH FL 33060 City-State-Zip: FRAMINGHAM MA 01701

Title **DIRECTOR** Title D

Name GARCIA, KIMIYO Name GOMES, ELISABETE

3509 BRIDGEWELL COURT Address Address 255 S CYPRESS RD

337 City-State-Zip: FORT MYERS FL 33916

City-State-Zip: POMPANO BEACH FL 33060

DIRECTOR Title Title DIRECTOR Name ARHIN, JOHN

RAMALHO GOMES, SOFIA Name Address 67 PLEASANT ST

255 S CYPRESS RD Address APT 5

City-State-Zip:

CAMBRIDGE MA 02139 POMPANO BEACH FL 33060 City-State-Zip:

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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.

02/18/2024 PRESIDENT SIGNATURE: FAUZINHA GOMES

Electronic Signature of Signing Officer/Director Detail

Date

FILED Feb 18, 2024

Secretary of State

5250234772CC

Officer/Director Detail Continued:

Title DIRECTOR

Name LOGAN, BRANDON JAMES Address 9319 LYONSWOOD DR

City-State-Zip: OWINGS MILLS MD 21117

Title DIRECTOR

Name BENNETT, SEAN

Address FLAT 8 ROYSTON CT

STOPFORD RD

City-State-Zip: LONDON E13 ONP

Title DIRECTOR

Name KOECH, KESHIA

Address 16 ROXANA ST

City-State-Zip: BOSTON MA 02136