2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N20000012764

Entity Name: BAHAMAS STRONG ALLIANCE INC.

Current Principal Place of Business:

301 W. ATLANTIC AVE., STE. 0-5
DELRAY BEACH, FL 33444

Current Mailing Address:

301 W. ATLANTIC AVE., STE. 0-5
DELRAY BEACH, FL 33444

FEI Number: 85-3921071

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

REGISTERED AGENTS INC.
7901 4TH ST. N. STE. 300
ST. PETERSBURG, FL 33702 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:

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Electronic Signature of Registered Agent   Date

Officer/Director Detail :

Title	DIRECTOR, PRESIDENT, TREASURER		Title	DIRECTOR
Name	LARSON, SUSAN		Name	HOLOWESKO, ALESSANDRA
Address	301 W. ATLANTIC AVE., STE. 0-5		Address	301 W. ATLANTIC AVE., STE. 0-5
City-State-Zip:	DELRAY BEACH FL 33444		City-State-Zip:	DELRAY BEACH FL 33444
Title	DIRECTOR, SECRETARY		Title	DIRECTOR
Name	LYONS, LUCY		Name	VOIGTMAN, JON
Address	301 W. ATLANTIC AVE., STE. 0-5		Address	301 W. ATLANTIC AVE., STE. 0-5
City-State-Zip:	DELRAY BEACH FL 33444		City-State-Zip:	DELRAY BEACH FL 33444
Title	DIRECTOR		Title	DIRECTOR
Name	HERNANDEZ, DINO		Name	STEVENS, KIRSTEN
Address	301 W. ATLANTIC AVE., STE. 0-5		Address	301 W. ATLANTIC AVE., STE. 0-5
City-State-Zip:	DELRAY BEACH FL 33444		City-State-Zip:	DELRAY BEACH FL 33444

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: KIRSTEN STEVENS   DIRECTOR   05/01/2023

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Electronic Signature of Signing Officer/Director Detail   Date