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

DOCUMENT# N20000013092

Entity Name: EQUITY ENTREPRENEUR CENTER, INC

**FILED** Mar 15, 2023 **Secretary of State** 9036648066CC

## **Current Principal Place of Business:**

319 CLEMATIS STREET

STE. 412

WEST PALM BEACH, FL 33401

## **Current Mailing Address:**

319 CLEMATIS STREET SUITE 412 SUITE 412

WEST PALM BEACH, FL 33401 US

FEI Number: 86-2100512 Certificate of Status Desired: Yes

## Name and Address of Current Registered Agent:

LEWIS, BRUCE N. 319 CLEMATIS STREET SUITE 412 WPB, FL 33401 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: BRUCE N. LEWIS 03/15/2023

> Date Electronic Signature of Registered Agent

Officer/Director Detail:

Title Title CE

Name ROBERTS, CHRISTINE Name SMITH, ANGELA

319 CLEMATIS STREET 319 CLEMATIS STREET Address Address

**SUITE 412 SUITE 412** 

City-State-Zip: WEST PALM BEACH FL 33411 City-State-Zip: WEST PALM BEACH FL 33401

Title SEC Title TRES

Name GREEN, SHARIFA Name HENRY, CLIVE

Address 319 CLEMATIS STREET Address **CLEMATIS STREET** 

SUITE 412 SUITE 412

City-State-Zip: WEST PALM BEACH FL 33401 City-State-Zip: WEST PALM BEACH FL 33401

Title D Title DIRECTOR

GIDEON-TAYOR, KEELY MILLER, KAREN Name Name

319 CLEMATIS STREET 319 CLEMATIS STREET Address Address

**SUITE 412** SUITE 412

City-State-Zip: WEST PALM BEACH FL 33401 City-State-Zip: WEST PALM BEACH FL 33401

**DIRECTOR** Title **DIRECTOR** Title

Name GARDENER, DARNELL Name BRADSHAW, JAMIE-LEE Address 319 CLEMATIS STREET Address 319 CLEMATIS STREET

> **SUITE 412** SUITE 412

WEST PALM BEACH FL 33401 WEST PALM BEACH FL 33401 City-State-Zip: City-State-Zip:

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: SHARIFA GREEN SECRETARY 03/15/2023