Current Mailing Address:					
PO BOX 1055 LEHIGH ACRES, FL 33970 US					
FEI Number: 65-0163140 Certificate or			Certificate of Status Desire	d: No	
Name and Address of Current Registered Agent:					
HERNANDEZ, LEONIE 312 CLEVELAND AVE N LEHIGH ACRES, FL 33936 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	E LEONIE HERNANDEZ		0	9/12/2019	
	Electronic Signature of Registered Agent			Date	
Officer/Director Detail :					
Title	PRESIDENT	Title	SECRETARY		
Name	HERNANDEZ, LEONIE	Name	CHERIGO, CAROL		
Address	312 CLEVELAND AVE N	Address	P O BOX 1055		
City-State-Zip:	LEHIGH ACRES FL 33936	City-State-Zip:	LEHIGH ACRES FL 33970-1055		
Title	TREASURER	Title	ASSISTANT SECRETARY		
Name	PRESCOTT, VENITA	Name	ROBINSON, AILETTE		
Address	P O BOX 1055	Address	PO BOX 1055		
City-State-Zip:	LEHIGH ACRES FL 33970-1055	City-State-Zip:	LEHIGH ACRES FL 33970		
Title	ASSISTANT TREASURER	Title	TRUSTEE		
Name	WASHINGTON, OLIVE	Name	BASIL, DOWNES		
Address	P.O. BOX 1055	Address	P.O. BOX 1055		
City-State-Zip:	LEHIGH ACRES FL 33970-1055	City-State-Zip:	LEHIGH ACRES FL 33970-1055		
Title	TRUSTEE	Title	TRUSTEE		
Name	WRIGHT, ELAINE	Name	STEWART, LEROY		
Address	P O BOX 1055	Address	P O BOX 1055		
City-State-Zip:	LEHIGH ACRES FL 33970-1055	City-State-Zip:	LEHIGH ACRES FL 33970-1055		
		Continues on page 2			

Entity Name: CARIBBEAN AMERICAN SOCIAL CLUB OF LEHIGH ACRES INC.

Current Principal Place of Business:

312 CLEVELAND AVE N LEHIGH ACRES, FL 33936

DOCUMENT# N35263

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

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: LEONIE HERNANDEZ

PRESIDENT

09/12/2019 Date

Electronic Signature of Signing Officer/Director Detail

FILED Sep 12, 2019 Secretary of State 3649964482CC

Officer/Director Detail Continued :

Title	VP
Name	HOPKINSON, DAPHNE
Address	PO BOX 1055
City-State-Zip:	LEHIGH ACRES FL 33970