

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N93000002196

**Entity Name:** VETERANS MEMORIAL & MULTICULTURAL HISTORIES,  
INCORPORATED

**FILED**  
**Apr 26, 2024**  
**Secretary of State**  
**7737628384CC**

**Current Principal Place of Business:**

440 SOUTH ROSEMARY AVENUE  
10  
WEST PALM BEACH, FL 33401

**Current Mailing Address:**

440 SOUTH ROSEMARY AVENUE  
10  
WEST PALM BEACH, FL 33401 US

**FEI Number: 65-0410121**

**Certificate of Status Desired: No**

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

CARTWRIGHT, CARLTON G CEO  
440 S. ROSEMARY AVENUE  
10  
WEST PALM BEACH, 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:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title TREA  
Name HOOKS, LEE  
Address 3802 WESTVIEW AVENUE  
City-State-Zip: WEST PALM BEACH FL 33407

Title PRESIDENT  
Name LEE, DJUAN  
Address 1507 DALE LANE  
City-State-Zip: DELRAY BEACH FL 33444

Title SECRETARY  
Name SQUIRE, KEITH  
Address 1448 WEST 36TH STREET  
City-State-Zip: RIVIERA BEACH FL 33404

Title EXECUTIVE DIRECTOR  
Name CARTWRIGHT, CARLTON G  
Address 440 SOUTH ROSEMARY AVENUE  
10  
City-State-Zip: WEST PALM BEACH FL 33401

Title MEMBER  
Name ABEL, KEITH  
Address 2156 APPLETON CIRCLE NORTH  
City-State-Zip: OAKLAND PARK FL 33309

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: CARLTON G. CARTWRIGHT**

**EXECUTIVE DIRECTOR**

**04/26/2024**

Electronic Signature of Signing Officer/Director Detail

Date