

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N97000004608

**Entity Name:** THE CARIBBEAN AMERICAN CLUB, INC.**Current Principal Place of Business:**6211 S MARTINDALE AVENUE  
TAMPA, FL 33611**Current Mailing Address:**PO BOX 320032  
TAMPA, FL 33679**FEI Number:** 59-3466877**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**TAYLOR, MARY L.  
PREVATT ENGLAND & TAYLOR  
201 N FRANKLIN SUITE 2505  
TAMPA, FL 33602 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:** MARY L. TAYLOR

04/27/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**Title DIRECTOR  
Name BORDEN, SYLVIA  
Address PO BOX 320032  
City-State-Zip: TAMPA FL 33679Title DIRECTOR  
Name ENSMINGER, SHEILA  
Address PO BOX 320032  
City-State-Zip: TAMPA FL 33679Title DIRECTOR  
Name BROWN, MARLENE  
Address PO BOX 320032  
City-State-Zip: TAMPA FL 33679Title DIRECTOR  
Name MOORE, TAMMY  
Address PO BOX 320032  
City-State-Zip: TAMPA FL 33679Title DIRECTOR  
Name WHITE, BLAKE  
Address PO BOX 320032  
City-State-Zip: TAMPA FL 33679Title PRESIDENT  
Name BORDEN, DANALEESA  
Address PO BOX 320032  
City-State-Zip: TAMPA FL 33679Title TREASURER  
Name ERNI, MARY  
Address PO BOX 320032  
City-State-Zip: TAMPA FL 33679

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:** SYLVIA BORDEN

DIRECTOR

04/27/2021

Electronic Signature of Signing Officer/Director Detail

Date