

2022 FLORIDA NOT FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N99000004416

Entity Name: FLORIDA CARIBBEAN STUDENTS ASSOCIATION, INC.**Current Principal Place of Business:**2800 PONCE DE LEON BLVD 12TH FLOOR
CORAL GABLES, FL 33134**Current Mailing Address:**2800 PONCE DE LEON BLVD 12TH FLOOR
CORAL GABLES, FL 33134 US**FEI Number:** 65-0350357**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HILL, MARLON
2800 PONCE DE LEON BLVD 12TH FLOOR
CORAL GABLES, FL 33134 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:** MARLON HILL

04/22/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name VENERIN, YR NANDA
Address 4918 14TH ST W
City-State-Zip: BRADENTON FL 34027

Title TREASURER
Name HYLTON, SHEMAR
Address 5080 NW COVENTRY CIRCLE
City-State-Zip: PORT ST LUCIE FL 34986

Title PUBLIC RELATIONS OFFICER
Name MAGLOIRE, CHEY
Address 3000 SW 35TH PL
City-State-Zip: GAINESVILLE FL 32608

Title DISTRICT 3 DIRECTOR
Name BURGZORG, SY-VANNAH
Address 640 DR MARY MCLEOD BETHUNE BLVD
City-State-Zip: DAYTONA BEACH FL 32114

Title VP
Name THOMPSON, TARANIQUE
Address 640 DR. MARY MCLEOD BETHUNE BLVD
City-State-Zip: DAYTONA BEACH FL 32114

Title SECRETARY
Name DEFAREAU, BIANCA
Address 2566 W TENNESSEE ST
City-State-Zip: TALLAHASSEE FL 32304

Title DISTRICT 2 DIRECTOR
Name RUSSELL, TORIE
Address 3000 SW 35TH PLACE
City-State-Zip: GAINESVILLE FL 32608

Title DISTRICT 4 DIRECTOR
Name SHAW, STEPHAN
Address 3410 PUNKIN PATCH LN
City-State-Zip: DOVER FL 33527

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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: YR NANDA VENERIN

PRESIDENT

04/22/2022

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	MISS FCSA
Name	ANTOINETTE, ZOE
Address	4262 WEST PLAZA DR
City-State-Zip:	ORLANDO FL 32816