

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000249968

**Entity Name:** BLACK BUSINESS COALITION OF THE TREASURE COAST, LLC**Current Principal Place of Business:**1068 SW MAJORCA AVE  
PORT ST. LUCIE, FL 34953**Current Mailing Address:**1068 SW MAJORCA AVE  
PORT ST. LUCIE, FL 34953**FEI Number:** 87-1115641**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**HALL-BRINKLEY, GWENDOLYN E  
1068 SW MAJORCA AVE  
PORT ST. LUCIE, FL 34953 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**Authorized Person(s) Detail :**

Title	PRESIDENT
Name	HALL-BRINKLEY, GWENDOLYN E
Address	1068 SW MAJORCA AVE
City-State-Zip:	PORT ST. LUCIE FL 34953

Title	SECRETARY
Name	SOLOMON, JANA D
Address	1009 SE 16TH ST
City-State-Zip:	STUART FL 34996

Title	AUTHORIZED MEMBER
Name	FARRO, HOWARD D
Address	3756 SW HONEY TERR
City-State-Zip:	PALM CITY FL 34996

Title	TREASURER
Name	DICKENS, IDA B
Address	907 SE HALL ST
City-State-Zip:	STUART FL 34994

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** GWENDOLYN E. HALL-BRINKLEY**PRESIDENT****03/09/2022**\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail\_\_\_\_\_  
Date