

2021 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F18000004874

Entity Name: CENTER FOR POPULAR DEMOCRACY ACTION FUND, INC.

FILED
Apr 02, 2021
Secretary of State
8612808850CC

Current Principal Place of Business:

449 TROUTMAN ST.
SUITE A
BROOKLYN, NY 11237

Current Mailing Address:

449 TROUTMAN ST.
SUITE A
BROOKLYN, NY 11237 US

FEI Number: 45-3860271

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

INCorp SERVICES, INC.
17888 67TH COURT NORTH
LOXAHATCHEE, FL 33470 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 D
Name ARCHILA, ANA MARIA
Address 449 TROUTMAN ST.
SUITE A
City-State-Zip: BROOKLYN NY 11237

Title D
Name BOULTON, CLAIRE DAVIS
Address 449 TROUTMAN ST.
SUITE A
City-State-Zip: BROOKLYN NY 11237

Title DP
Name EPPS-ADDISON, JENNIFER
Address 449 TROUTMAN ST.
SUITE A
City-State-Zip: BROOKLYN NY 11237

Title D
Name FRIEDMAN, ANDREW
Address 449 TROUTMAN ST.
SUITE A
City-State-Zip: BROOKLYN NY 11237

Title D
Name GARZA, JOSE
Address 449 TROUTMAN ST.
SUITE A
City-State-Zip: BROOKLYN NY 11237

Title D
Name GRIFFIN, FELICIA
Address 449 TROUTMAN ST.
SUITE A
City-State-Zip: BROOKLYN NY 11237

Title D
Name KETTENRING, BRIAN
Address 449 TROUTMAN ST.
SUITE A
City-State-Zip: BROOKLYN NY 11237

Title D
Name KRAMER, ERIN
Address 449 TROUTMAN ST.
SUITE A
City-State-Zip: BROOKLYN NY 11237

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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: CHRISTINA LIVINGSTON

CHAIR

04/02/2021

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DT
Name LIMBOCKER, SPENCE
Address 449 TROUTMAN ST.
SUITE A
City-State-Zip: BROOKLYN NY 11237

Title D
Name LOPEZ, REYNA
Address 449 TROUTMAN ST.
SUITE A
City-State-Zip: BROOKLYN NY 11237

Title D
Name MITCHELL, MAURICE
Address 449 TROUTMAN ST.
SUITE A
City-State-Zip: BROOKLYN NY 11237

Title D
Name WESTIN, JONATHAN
Address 449 TROUTMAN ST.
SUITE A
City-State-Zip: BROOKLYN NY 11237

Title DIRECTOR, CHAIRMAN
Name LIVINGSTON, CHRISTINA
Address 449 TROUTMAN ST.
SUITE A
City-State-Zip: BROOKLYN NY 11237

Title DIRECTOR
Name TORRES, GUSTAVO
Address 449 TROUTMAN ST.
SUITE A
City-State-Zip: BROOKLYN NY 11237

Title D, SECRETARY
Name SOTA, DEBBIE
Address 449 TROUTMAN ST.
SUITE A
City-State-Zip: BROOKLYN NY 11237

Title DV
Name VALDEZ, JAVIER
Address 449 TROUTMAN ST.
SUITE A
City-State-Zip: BROOKLYN NY 11237

Title DIRECTOR
Name SNYDER, BRANDEN
Address 449 TROUTMAN ST.
SUITE A
City-State-Zip: BROOKLYN NY 11237