

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000005525

FILED
Jun 04, 2005
Secretary of State

Entity Name: ST. VINCENT AND THE GRENADINES CULTURAL ASSOCIATION INC.

Current Principal Place of Business:

541 SW 70TH AVENUE
PEMBROKE PINES, FL 33023

New Principal Place of Business:

Current Mailing Address:

541 SW 70TH AVENUE
PEMBROKE PINES, FL 33023

New Mailing Address:

FEI Number: 04-3710182 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

SAMUEL, MAUDE
541 SW 70TH AVENUE
PEMBROKE PINES, FL 33023 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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CAMBRIDGE, BASIL
Address: 700 N. 70TH AVENUE
City-St-Zip: HOLLYWOOD, FL 33024

Title: VP () Delete
Name: HAMLET, JOHN
Address: 117 NE 91 STREET
City-St-Zip: MIAMI, FL 33138

Title: S () Delete
Name: SAMUEL, MAUDE
Address: 541 SW 70TH AVENUE
City-St-Zip: PEMBROKE PINES, FL 33023

Title: T () Delete
Name: EDWARDS, MAREEZE
Address: 16213 NW 18TH STREET
City-St-Zip: PEMBROKE PINES, FL 33028

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JOHN HAMLET

VP

06/04/2005

Electronic Signature of Signing Officer or Director

Date