2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000004691

FILED Jan 14, 2010 Secretary of State

Entity Name: THE CARIBBEAN AMERICAN ASSOCIATION OF LAKE COUNTY, INC.

Current Principal Place of Business: New Principal Place of Business:

330 3RD ST

CLERMONT, FL 34711 US

Current Mailing Address: New Mailing Address:

P.O. BOX 120930 P.O. BOX 120580

CLERMONT, FL 34712 US CLERMONT, FL 34711 US

FEI Number: 71-1005993 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

THOMPSON, MILTON L 330 3RD ST

CLERMONT, FL 34711 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: F

Name: THOMPSON, MILTON L
Address: 1516 SUNSET VILLAGE BLVD
City-St-Zip: CLERMONT, FL 34711 US

Title: VF

Name: BARRETT, CHRISTOPHER
Address: 2785 FALCON RIDGE
City-St-Zip: CLERMONT, FL 34711

Title:

 Name:
 CAMPBELL, NEVILLE N

 Address:
 1431 LAKEMIST LN

 City-St-Zip:
 CLERMONT, FL 34711 US

Title:

 Name:
 POWELL, BASIL

 Address:
 1701 TURNSTONE WAY

 City-St-Zip:
 CLERMONT, FL 34711 US

Title:

Name: WALLACE, INEZ

Address: 16516 ARROW HEAD TRAIL City-St-Zip: CLERMONT, FL 34711 US

Title: [

 Name:
 RILEY, MARSHA

 Address:
 10238 DOVEHILL LN

 City-St-Zip:
 CLERMONT, FL 34711 US

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: MARSHA RIILEY D 01/14/2010