

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000001943

FILED  
Sep 03, 2008  
Secretary of State

**Entity Name:** CARIBBEAN COALITION OF ASSOCIATIONS, INC.

**Current Principal Place of Business:**

1418 27TH AVE. S  
ST PETERSBURG, FL 33705

**New Principal Place of Business:**

**Current Mailing Address:**

1418 27TH AVE. S  
ST PETERSBURG, FL 33705

**New Mailing Address:**

**FEI Number:** 37-1544985      **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:**

JACKSON, DONALD  
1418 27TH AVE. S  
ST PETERSBURG, FL 33705      US

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

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: D      ( ) Delete  
Name: PURCELL, TREVOR  
Address: 12908 RAINFOREST DR  
City-St-Zip: TAMPA, FL 33617

Title: D      ( ) Delete  
Name: LARMOND, ELEYES E  
Address: 14613 PINE GLEN CIRCLE  
City-St-Zip: LUTZ, FL 33559

Title: D      (X) Delete  
Name: SEALES, ANGELA  
Address: 11628 HIDDEN HOLLOW CIRCLE  
City-St-Zip: TAMPA, FL 33635

Title: D      ( ) Delete  
Name: JACKSON, DONALD  
Address: P.O. BOX 14046  
City-St-Zip: ST PETERSBURG, FL 33733

Title: D      ( ) Delete  
Name: DANIEL, GARY S  
Address: 708 KINGSWOOD LP  
City-St-Zip: BRANDON, FL 33511

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D      (X) Change ( ) Addition  
Name: MARSHALL, GENE  
Address: 3799 WELLINGTON PK WAY  
City-St-Zip: PALM HARBOR, FL 34685

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 exemption stated in Chapter 119, 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: DONALD JACKSON

D

09/03/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date