

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000003107

FILED
Mar 15, 2011
Secretary of State

Entity Name: THE COALITION FOR BARBADOS ASSOCIATION OF CENTRAL FLORIDA, INC.

Current Principal Place of Business:

2307 BOGGY CREEK ROAD
SUITE 24
KISSIMMEE, FL 34744

New Principal Place of Business:

Current Mailing Address:

2307 BOGGY CREEK ROAD
SUITE 24
KISSIMMEE, FL 34744

New Mailing Address:

FEI Number: 27-1990626

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MACHIN, MABEL CPA
944 CITRUS WOOD CT.
SUITE A
LONGWOOD, FL 32750 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: PD
Name: HUSBANDS, DALE
Address: 9121 LAKE FISCHER BLVD.
City-St-Zip: GOTH A, FL 34734

Title: VD
Name: MORRIS, DENNIS
Address: 1016 MCDANIEL CREEK CT.
City-St-Zip: OVIEDO, FL 32765

Title: TD
Name: MONROE, WALTON
Address: 1795 FIRWOOD CT
City-St-Zip: ORLANDO, FL 32818

Title: SD
Name: FORBES, NATASHA
Address: POST OFFICE BOX 176
City-St-Zip: KILLARNEY, FL 34740

Title: PD
Name: CAMBPELL, RYVAN
Address: 7757 BARBERRY DRIVE
City-St-Zip: ORLANDO, FL 32835

Title: ATD
Name: BOWEN, RALPH
Address: 1926 PALM VIEW DRIVE
City-St-Zip: APOPKA, FL 32712

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: WALTON MONROE

TD

03/15/2011

Electronic Signature of Signing Officer or Director

Date