

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N26449

FILED
Apr 21, 2008
Secretary of State

Entity Name: GRENADA CULTURAL AND CIVIC ASSOCIATION, INC.

Current Principal Place of Business:

P O BOX 693090
MIAMI, FL 33269

New Principal Place of Business:

2306 SUNSHINE BLVD
MIRAMAR, FL 33023

Current Mailing Address:

P.O. BOX 693090
MIAMI, FL 33269

New Mailing Address:

P.O. BOX 693090
MIAMI, FL 33269

FEI Number: 65-0151798

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

NEDD, KENNETH J.
1460 N.W. 196 TERRACE
MIAMI, FL 33169 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: P () Delete
Name: JULIEN-HOOD, MICHEAL
Address: 2306 SUNSHINE BLVD.
City-St-Zip: MIRAMAR, FL 33023

Title: V () Delete
Name: MARECHEAU, ARTHUR
Address: 2131 ACAPULCO DR.
City-St-Zip: MIRAMAR, FL 33023

Title: T () Delete
Name: ALLICK, ELIZABETH
Address: 21220 N. MIAMI AVE.
City-St-Zip: MIAMI, FL 33169

Title: S () Delete
Name: LEWIS, BRENDA
Address: 1521 NW 179TH TERR.
City-St-Zip: MIAMI, FL 33169

Title: AST () Delete
Name: ANTHEA, JAMES
Address: 71 NW 163RD STREET
City-St-Zip: MIAMI, FL 33169

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HOOD-JULIEN, MICHEAL
Address: 2306 SUNSHINE BLVD.
City-St-Zip: MIRAMAR, FL 33023

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

Title: T (X) Change () Addition
Name: ARCHIBALD, SAMOA
Address: 14135 NW 5 CT. NORTH MIAMI
City-St-Zip: MIAMI, FL 33168

Title: S (X) Change () Addition
Name: HOOD-JULIEN, MICHELLE K
Address: 2306 SUNSHINE BLVD
City-St-Zip: MIAMI, FL 33169

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: MICHAEL HOOD-JULIEN

P

04/21/2008

Electronic Signature of Signing Officer or Director

Date