

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N41582

FILED
Jan 08, 2010
Secretary of State

Entity Name: BARBADOS ASSOCIATION OF CENTRAL FLORIDA INC.

Current Principal Place of Business:

1795 FIRWOOD CT.
ORLANDO, FL 32818

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 680688
ORLANDO, FL 32868 06

New Mailing Address:

1795 FIRWOOD CT.
ORLANDO, FL 32818

FEI Number: 59-3037048

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MONROE, WALT
1795 FIRWOOD COURT
ORLANDO, FL 32818 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: T
Name: MONROE, WALTON
Address: 1795 FIRWOOD CT
City-St-Zip: ORLANDO, FL 32818

Title: PD
Name: HUSBANDS, DALE
Address: 9121 LAKE FISCHER BLVD
City-St-Zip: GOTH A, FL 34734

Title: VPD
Name: MORRIS, DENNIS
Address: 1016 MCDANIELCREEK CT.
City-St-Zip: OVIEDO, FL 32765

Title: SEC
Name: FORBES THORNE, NATASHA
Address: P.O.BOX 176
City-St-Zip: KILLARNEY, FL 34740

Title: ASTR
Name: BOWEN, RALPH
Address: 1521 PALM VIEW DR.
City-St-Zip: APOPKA, FL 32712

Title: 3271
Name: PILE, TYRELL CORS
Address: 8815 BAY VISTA CT.
City-St-Zip: ORLANDO, FL 32825

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

T

01/08/2010

Electronic Signature of Signing Officer or Director

Date