2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N46379

FILED May 03, 2010 Secretary of State

Entity Name: CARIBBEAN AND FLORIDIAN ASSOCIATION INC.

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

2346 ALBION AVE ORLANDO, FL 32833

Current Mailing Address: New Mailing Address:

P. O. BOX 450786 KISSIMMEE, FL 34743

FEI Number: 59-3131979 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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: Name and Address of New Registered Agent:

ROBERTS, EUNICE 2346 ALBION AVE

ORLANDO, FL 32833 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: I

Name: ROBERTS, EUNICE Address: 2346 ALBION AVE City-St-Zip: ORLANDO, FL 32833

Title: VP

Name: SHAW, CASMORE
Address: 3401 PINERIDGE CIRCLE
City-St-Zip: KISSIMMEE, FL 34746

Title: SD

Name: MONROE, TRACY
Address: 1795 FIRWOOD COURT
City-St-Zip: ORLANDO, FL 32818

Title: T

Name: ROBINSON, WILFON

Address: 7941 GOLDEN POND CIRCLE City-St-Zip: KISSIMMEE, FL 34747

City-St-Zip. KidSilvilviLL, i L 347

Title: AS

Name: TOUUSAINT, THELMA Address: 3220 FAIRFIELD DRIVE City-St-Zip: KISSIMMEE, FL 34743

Title: ASST Name: KING, URLA

Address: 12467 BEACONTREE WAY City-St-Zip: ORLANDO, FL 32837

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: WILFON T. ROBINSON T 05/03/2010