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Mar 05 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N95000000956 (1)

1. Corporation Name

THE BARBADOS CULTURAL AND EDUCATIONAL SOCIETY OF
FLORIDA, INC.

Principal Place of Business

Mailing Address

10170 N.W. 10 STREET
PLANTATION FL 3332210170 N.W. 10 STREET
PLANTATION FL 33322-65263. Date Incorporated or Qualified
02/27/19953a. Date of Last Report
02/16/1996

2. Principal Place of Business

2a. Mailing Address

21 P.O. Box 15721

26 P.O. Box 15721

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 Ft Lauderdale, Fla

28 Ft Lauderdale, Fla

24 Zip 33318

25 Country USA

29 Zip 33318

30 Country USA

4. FEI Number

65-0558944

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution\$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CUMBERBATCH, DELBERT F
10170 N.W. 10 STREET
PLANTATION FL 33322

81 Name

Bentley Hunte

82 Street Address (P.O. Box Number is Not Acceptable)

12322 W Sample Road

83

84 City

Coral Spring

FL

85 Zip Code

33065

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME CUMBERBATCH, DELBERT F
STREET ADDRESS 10170 N.W. 10 STREET
CITY - ST - ZIP PLANTATION FL 33322

X DELETE

TITLE SD
NAME SEALY, ROSLYN
STREET ADDRESS 9221 ANDORA DRIVE
CITY - ST - ZIP MIRAMAR FL 33025

DELETE

TITLE VPD
NAME GRAHAM, CHRISTINA
STREET ADDRESS 1213 NW 6 AVE
CITY - ST - ZIP FT LAUDERDALE FL

X DELETE

TITLE TD
NAME IFILL, KEITH A
STREET ADDRESS 3211 LUCERNE WAY
CITY - ST - ZIP MIRAMAR FL

X DELETE

TITLE ATD
NAME DENNY, MARVENE NURSE
STREET ADDRESS 811 E PALM RUN DR
CITY - ST - ZIP N LAUDERDALE FL

DELETE

TITLE ASD
NAME BARROW, CHERRON
STREET ADDRESS 12049 NW 9 CT
CITY - ST - ZIP CORAL SPRINGS FL

DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE President ID
1.2 NAME Hunte, Bentley
1.3 STREET ADDRESS 12322 W Sample Road
1.4 CITY - ST - ZIP Coral Spring, Fla 33065

X Change Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

X Change Addition

3.1 TITLE Vice President ID
3.2 NAME Edward Nichols
3.3 STREET ADDRESS 2850 NW 8th St
3.4 CITY - ST - ZIP Pompano Beach Fla 33069

X Change Addition

4.1 TITLE Treasurer ID
4.2 NAME Nantz, Dennis
4.3 STREET ADDRESS 10125 SW 16th St #204
4.4 CITY - ST - ZIP Pembroke Pines, Fla 33025

X Change Addition

5.1 TITLE Asst. Treasurer
5.2 NAME Ferdinand - Betty, Claudia
5.3 STREET ADDRESS 6990 NW 13 Ct
5.4 CITY - ST - ZIP Sunrise, Fla 33313

X Change Addition

6.1 TITLE Asst. Secretary
6.2 NAME Haynes, Wendell
6.3 STREET ADDRESS 420 NW 18th Terr
6.4 CITY - ST - ZIP Miami, Fla 33169

X Change Addition

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 199.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13, changed, or on an attachment with an address.

SIGNATURE: Roslyn Sealy Roslyn Sealy 2/27/97 777-2060
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 0037045

CR2E037 (9/96)