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Jun 17 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA 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.

400002563634
-06/18/98-01009-046
***66.25

Principal Place of Business: 10170 NW 10 STREET PLANTATION FL 33322
Mailing Address: 10170 NW 10TH STREET PLANTATION FL 33322

3. Date Incorporated or Qualified: 08-27-1995
4. FEI Number: 65-0558944
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? Yes No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

2. Principal Place of Business: 21 Suite, Apt. #, etc.: 22 City & State: 23 Zip: 24 Country: 25
2a. Mailing Address: 26 Suite, Apt. #, etc.: 27 City & State: 28 Zip: 29 Country: 30

9. Name and Address of Current Registered Agent
BENTLEY HUNTE
11088 NW 19 ST.
CORAL SPRING, FL 33069

10. Name and Address of New Registered Agent
B1 Name: CUMBERBATCH, DELBERT F
B2 Street Address (P.O. Box Number is Not Acceptable): 10170 NW 10 STREET
B3
B4 City: PLANTATION FL B5 Zip Code: 33322

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: *Delbert F. Cumberbatch* President DATE: 6/6/98

12. OFFICERS AND DIRECTORS

TITLE	PR	NAME	ARTHUR - LANE, PAMELA	STREET ADDRESS	14300 SW 88 AVE	CITY-ST-ZIP	MIAMI FL 33176	<input type="checkbox"/> DELETE
TITLE	PD	NAME	BENTLEY HUNTE	STREET ADDRESS	11088 NW 19 ST	CITY-ST-ZIP	CORAL SPRING FL 33069	<input checked="" type="checkbox"/> DELETE
TITLE	VPD	NAME	EDWARD NICHOLS	STREET ADDRESS	2850 NW 8TH ST.	CITY-ST-ZIP	POMPANO BEACH FL 33069	<input checked="" type="checkbox"/> DELETE
TITLE	ASD	NAME	WENDELL HAYNES	STREET ADDRESS	120 NW 184 TERR	CITY-ST-ZIP	MIAMI FL 33169	<input checked="" type="checkbox"/> DELETE
TITLE		NAME		STREET ADDRESS		CITY-ST-ZIP		<input type="checkbox"/> DELETE
TITLE		NAME		STREET ADDRESS		CITY-ST-ZIP		<input type="checkbox"/> DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PD	1.1 NAME	CUMBERBATCH DELBERT	1.1 STREET ADDRESS	10170 NW 10 STREET	1.1 CITY-ST-ZIP	PLANTATION FL 33322	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.1 TITLE	VPD	2.1 NAME	KOSLYN SEALY	2.1 STREET ADDRESS	9221 ANDORA DR.	2.1 CITY-ST-ZIP	MIRAMAR FL 33026	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.1 TITLE	TD	3.1 NAME	SONIA WARD	3.1 STREET ADDRESS	1907 SW 94TH AVE	3.1 CITY-ST-ZIP	MIRAMAR FL 33026	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.1 TITLE	ATD	4.1 NAME	AMY A. MALONEY	4.1 STREET ADDRESS	13900 SW 90TH AVE APT. BE 208	4.1 CITY-ST-ZIP	MIAMI FL 33176	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.1 TITLE	SS	5.1 NAME	CHRISTINA GRAHAM	5.1 STREET ADDRESS	1213 NW 6 AVE	5.1 CITY-ST-ZIP	FT. LAUDERDALE FL 33311	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.1 TITLE	ASD	6.1 NAME	WANDA LEWIS	6.1 STREET ADDRESS	11943 SW 208 TERR.	6.1 CITY-ST-ZIP	MIAMI FL 33177	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(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 if changed, or on an attachment with an address.

SIGNATURE: *Delbert F. Cumberbatch* DATE: 5/21/98 RESIDENT

CR2E037 (10/97)