

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N97000004948

1. Entity Name

CARIBBEAN-AMERICAN PEOPLE ASSOCIATION, INC.

**FILED**  
**Jan 19, 2000 8:00 am**  
**Secretary of State**

01-19-2000 90121 016 \*\*\*\*70.00

Principal Place of Business

1007 DEWSBURY WAY  
KISSIMMEE FL 34758

Mailing Address

POB 420155  
KISSIMMEE FL 34742-0155  
US

00000000



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

203 CRANBROOK DRIVE

Suite, Apt. #, etc.

3. Mailing Address

PO Box 420155

Suite, Apt. #, etc.

City & State

Kissimmee FL.

City & State

Kissimmee FL.

4. FEI Number

59-3480180

Applied For

Not Applicable

Zip

34758

Country

US

Zip

34742-0155

Country

US

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GRANT, GEORGE  
203 CRANBROOK DRIVE (POINCIANA)  
KISSIMMEE FL 34758

7. Name and Address of New Registered Agent

Name SONIA M. GRANT

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

203 CRANBROOK DRIVE

City Kissimmee

FL

Zip Code

34758

8. 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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:

FEE IS \$61.25

9. Election Campaign Financing

Trust Fund Contribution. ☐

\$5.00 May Be

Added to Fees

Make Check Payable to

Department of State

10. OFFICERS AND DIRECTORS

TITLE P ☒ Delete  
NAME GRACE, M.  
STREET ADDRESS 1007 DEWSBURY WAY  
CITY-ST-ZIP KISSIMMEE FL 34758

TITLE VP ☒ Delete  
NAME GRANT, S  
STREET ADDRESS 203 CRANBROOK DR  
CITY-ST-ZIP KISSIMMEE FL 34758

TITLE SD ☒ Delete  
NAME GILL, VANESSA  
STREET ADDRESS 605 GAZELLE COURT  
CITY-ST-ZIP KISSIMMEE FL 34758

TITLE T ☒ Delete  
NAME PETERS, C  
STREET ADDRESS 301 AZIN CT  
CITY-ST-ZIP KISSIMMEE FL 34758

TITLE D ☐ Delete  
NAME MORGAN, E  
STREET ADDRESS 336 COLONADE CT  
CITY-ST-ZIP KISSIMMEE FL 34758

TITLE D ☐ Delete  
NAME GRACE, D  
STREET ADDRESS 1007 DEWSBURY WAY  
CITY-ST-ZIP KISSIMMEE FL 34758

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE P ☒ Change ☐ Addition  
NAME SONIA M. GRANT  
STREET ADDRESS 203 CRANBROOK DRIVE  
CITY-ST-ZIP KISSIMMEE FL 34758

TITLE VP ☒ Change ☐ Addition  
NAME MARYSE NELSON  
STREET ADDRESS 804 MENDOZA DRIVE  
CITY-ST-ZIP KISSIMMEE FL 34758

TITLE SD ☒ Change ☐ Addition  
NAME FERRIST AZEEZ  
STREET ADDRESS 245 CHESHIRE COURT  
CITY-ST-ZIP KISSIMMEE FL 34758

TITLE T ☒ Change ☐ Addition  
NAME LINA HAMILTON  
STREET ADDRESS 814 MENDOZA DRIVE  
CITY-ST-ZIP KISSIMMEE FL 34758

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

SIGNATURE: SONIA M. GRANT 1-9-00 407 933 2887

03/17/99