

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000002228

FILED
May 07, 2007
Secretary of State

Entity Name: ST. VINCENT & THE GRENADINES ASSOCIATION OF FLORIDA, INC.

Current Principal Place of Business:

4275 NW 56TH DRIVE
COCONUT CREEK, FL 33073

New Principal Place of Business:

Current Mailing Address:

4275 NW 56TH DRIVE
COCONUT CREEK, FL 33073

New Mailing Address:

FEI Number: 65-0944450 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
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:

DOPWELL, CLEMON M
4275 NW 56TH DRIVE
COCONUT CREEK, FL 33073 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: PD () Delete
Name: BARROCK, SEPTY
Address: 5759 BLUEBERRY CT
City-St-Zip: FORT LAUDERDALE, FL 33313

Title: VPD () Delete
Name: POMPEY, JOEL
Address: 3900 NW 46TH AVENUE
City-St-Zip: LAUDERDALE LAKES, FL 33319

Title: TD () Delete
Name: MOUNSEY, IRWIN
Address: 5212 NW 98TH LANE
City-St-Zip: CORAL SPRINGS, FL 33076

Title: S () Delete
Name: DOPWELL, CLEMON
Address: 4275 NW 56TH DRIVE
City-St-Zip: COCONUT CREEK, FL 33073

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPD (X) Change () Addition
Name: CHRICHTON, CHRIS
Address: 6391 BARTON CREEK CIRCLE
City-St-Zip: LAKE WORTH, FL 33463

Title: PD (X) Change () Addition
Name: POMPEY, JOEL
Address: 3900 NW 46TH AVENUE
City-St-Zip: LAUDERDALE LAKES, FL 33319

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: PRO (X) Change () Addition
Name: DOPWELL, CLEMON
Address: 4275 NW 56TH DRIVE
City-St-Zip: COCONUT CREEK, FL 33073

Title: S () Change (X) Addition
Name: SAMUEL, SHELLY
Address: 5672 ROCK ISLAND RD.
City-St-Zip: TAMARAC, FL 33319

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: CLEMON DOPWELL

PRO

05/07/2007

Electronic Signature of Signing Officer or Director

Date