

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000002228

FILED
Apr 27, 2010
Secretary of State

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

Current Principal Place of Business:

1631 NW 46 AVE
LAUDERHILL, FL 33313 US

New Principal Place of Business:

Current Mailing Address:

ST. VINCENT & THE GRENADINES ASSOCIATION O
P. O BOX 590554
FT. LAUDERDALE, FL 33359 US

New Mailing Address:

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

Name and Address of Current Registered Agent:

SVGAFI
1631 NW 46 AVE
LAUDERHILL, FL 33313 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: VPD
Name: CHRIGHTON, CHRIS
Address: 6391 BARTON CREEK CIRCLE
City-St-Zip: LAKE WORTH, FL 33463

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

Title: TD
Name: DYETTE, PATRICIA
Address: 7761 NW 30TH ST
City-St-Zip: HOLLYWOOD, FL 33024 US

Title: PRO
Name: DEFREITAS, CUTHBERT
Address: 4481 NW 32ND ST
City-St-Zip: LAUDERDALE LAKES, FL 33319

Title: S
Name: BARROW, SUSAN
Address: 7641 NW 47TH AVE
City-St-Zip: COCONUT CREEK, FL 33073 US

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: JOEL POMPEY

PD

04/27/2010

Electronic Signature of Signing Officer or Director

Date