## 2018 FLORIDA NOT FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N00000004590

**Entity Name: ICONIC COMMUNITIES CORPORATION** 

**FILED** Mar 13, 2018 **Secretary of State** CR9584340431

**Current Principal Place of Business:** 

927 N.W. 6TH ST.

POMPANO BEACH, FL 33060

**Current Mailing Address:** 

137 N.W. 15TH STREET

POMPANO BEACH, FL 33060 US

FEI Number: 65-1045273 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

ELLINGTON, MATTHEW 137 N.W. 15TH STREET POMPANO BEACH, FL 33060-5434 US

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: MATTHEW ELLINGTON 03/13/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title **CHAIRMAN** Title **SECRETARY** 

ELLINGTON, MATTHEW Name Name ELLINGTON, DONNETTA 2980 HERRON LANE SW 2980 HERRON LANE S.W. Address Address

City-State-Zip: ATLANTA GA 30349 ATLANTA GA 30349 City-State-Zip:

Title ASST. TREASURER Title VC

Name LUCRET, CARELIA Name THORPE, TANYA

Address 2980 HERRON LANE S..W. Address 2980 HERRON LANE S.W. ATLANTA GA 30349 City-State-Zip:

ATLANTA GA 30349 City-State-Zip:

ASST. SECRETARY Title Title **TREASURER** Name CRISWELL, MELANESE Name RICHMOND, NATASHA

Address 2980 HERRON LANE S.W. 2980 HERRON LANE S.W. Address

City-State-Zip: ATLANTA GA 30349 ATLANTA GA 30349 City-State-Zip:

Title **TRUSTEE** 

ELLINGTON, EMMA Name

137 N.W. 15TH STREET Address

POMPANO BEACH FL 33060 City-State-Zip:

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.

03/13/2018 SIGNATURE: MATTHEW ELLINGTON **CHAIRMAN** 

Electronic Signature of Signing Officer/Director Detail

Date