2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 01, 2020
Secretary of State
3611568177CC

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Entity Name: COLLECTIVE EMPOWERMENT GROUP OF SOUTH FLORIDA, INCORPORATED

Current Principal Place of Business:

4900 W. HALLANDALE BEACH BOULEVARD
PEMBROKE PARK, FL 33023

Current Mailing Address:

P. O. BOX 557035
MIAMI, FL 33255 US

FEI Number: 20-1348951

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WILLIS, JOAQUIN DR.
4900 W. HALLANDALE BEACH BOULEVARD
PEMBROKE PARK, FL 33023 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:

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	PRESIDENT, DIRECTOR	Title	CHAIRMAN, DIRECTOR
Name	WILLIS, JOAQUIN . REVEREND	Name	JONES, ERIC REVEREND
Address	4900 W. HALLANDALE BEACH BOULEVARD	Address	4900 W. HALLANDALE BEACH BOULEVARD
City-State-Zip:	PEMBROKE PARK FL 33023	City-State-Zip:	PEMBROKE PARK FL 33023
Title	DIRECTOR	Title	SECRETARY, DIRECTOR
Name	ANDERSON, MICHAEL REVEREND	Name	ADAMS, JAMES BISHOP
Address	4900 W. HALLANDALE BEACH BOULEVARD	Address	4900 W. HALLANDALE BEACH BOULEVARD
City-State-Zip:	PEMBROKE PARK FL 33023	City-State-Zip:	PEMBROKE PARK FL 33023
Title	DIRECTOR	Title	DIRECTOR
Name	GERVAIS, EDDY REVEREND	Name	HAFNER, LAURIE REVEREND
Address	4900 W. HALLANDALE BEACH BOULEVARD	Address	4900 W. HALLANDALE BEACH BOULEVARD
City-State-Zip:	PEMBROKE PARK FL 33023	City-State-Zip:	PEMBROKE PARK FL 33023
Title	DIRECTOR	Title	VP, DIRECTOR
Name	NASH-LESTER, CAROL REVEREND	Name	JACKSON, JR., ALPHONSO REVEREND
Address	4900 W. HALLANDALE BEACH BOULEVARD	Address	4900 W. HALLANDALE BEACH BOULEVARD
City-State-Zip:	PEMBROKE PARK FL 33023	City-State-Zip:	PEMBROKE PARK FL 33023

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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: R. JOAQUIN WILLIS PRESIDENT 02/01/2020

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	CHAMBERS, III, JOHN H. REVEREND
Address	4900 W. HALLANDALE BEACH BOULEVARD
City-State-Zip:	PEMBROKE PARK FL 33023

Title	DIRECTOR
Name	DUKES, KELON REVEREND
Address	4900 W. HALLANDALE BEACH BOULEVARD
City-State-Zip:	PEMBROKE PARK FL 33023

Title	DIRECTOR
Name	PARROT, BENJAMIN REVEREND
Address	4900 W. HALLANDALE BEACH BOULEVARD
City-State-Zip:	PEMBROKE PARK FL 33023

Title	DIRECTOR
Name	BROOKS, ROBERT REVEREND
Address	4900 W. HALLANDALE BEACH BOULEVARD
City-State-Zip:	PEMBROKE PARK FL 33023

Title	DIRECTOR
Name	JOHNSON, THEO REVEREND
Address	4900 W. HALLANDALE BEACH BOULEVARD
City-State-Zip:	PEMBROKE PARK FL 33023