

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N10000003845

**Entity Name:** NATIONAL ASSOCIATION OF BLACK ACCOUNTANTS, INC.

**Current Principal Place of Business:**

3084 QUANTUM LAKES DR  
BOYNTON BEACH, FL 33426

**Current Mailing Address:**

PO BOX 245068  
PEMBROKE PINES, FL 33024-0101

**FEI Number:** 59-1643906

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

SATTAUR, SHEREEN  
3084 QUANTUM LAKES DR  
BOYNTON BEACH, FL 33426 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 P  
Name VILLANUEVA, MARC  
Address PO BOX 245068  
City-State-Zip: PEMBROKE PINES FL 33024-0101

Title T  
Name FRERE, CARICE P  
Address PO BOX 245068  
City-State-Zip: PEMBROKE PINES FL 33024-0101

Title S  
Name BLOOM, DANITA A  
Address PO BOX 245068  
City-State-Zip: PEMBROKE PINES FL 33024-0101

Title D  
Name KOIRALA, NAVANEET  
Address PO BOX 245068  
City-State-Zip: PEMBROKE PINES FL 33024-0101

*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:** CARICE PETIT FRERE

**TREASURER**

**04/30/2016**

Electronic Signature of Signing Officer/Director Detail

Date