

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000006332

Entity Name: BROWARD ALLIANCE OF CARIBBEAN EDUCATORS, INC.**Current Principal Place of Business:**5466 NW 94TH TERRACE
SUNRISE, FL 33351**Current Mailing Address:**P.O. BOX 16812
PLANTATION, FL 33318 US**FEI Number:** 27-3150273**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MULLINGS, BEVERLY DR.
5466 NW 94TH TERRACE
SUNRISE, FL 33351 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:** DR.BEVERLY MULLINGS

01/13/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	T
Name	MULLINGS, BEVERLY DR.
Address	5466 NW 94TH TERRACE
City-State-Zip:	SUNRISE FL 33351

Title	PRESIDENT/CHAIR
Name	HINKSON, RUTH DR.
Address	P.O. BOX 16812
City-State-Zip:	PLANTATION FL 33318

Title	SECRETARY
Name	DAVIS, BEVERLEY
Address	PO BOX 16812
City-State-Zip:	PLANTATION FL 33318

Title	VP/CO-CHAIR
Name	PLUMMER, MAXINE
Address	P.O. BOX 16812
City-State-Zip:	PLANTATION FL 33318

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: BEVERLY MULLINGS

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01/13/2021

Electronic Signature of Signing Officer/Director Detail

Date