## 2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000001789

Entity Name: MONTEGO BAY HIGH SCHOOL INTERNATIONAL ALUMNAE

ASSOCIATION, INC.

## **Current Principal Place of Business:**

3975 ISLE VIEW DR SUITE 104 WELLINGTON, FL 33414

# **Current Mailing Address:**

PO BOX 590456

FORT LAUDERDALE, FL 33359 US

FEI Number: NOT APPLICABLE Certificate of Status Desired: No.

## Name and Address of Current Registered Agent:

STRATEGY NOOK 15067 SW 103RD TERRACE NO 14203 MIAMI, FL 33196 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: JANET JOHNSON 04/16/2024

> Date Electronic Signature of Registered Agent

#### Officer/Director Detail:

Title **SECRETARY** Title **DIRECTOR** Name MORRIS-CLARKE, KAREN Name SEATON, EDITH Address PO BOX 590456 Address PO BOX 590456

City-State-Zip: FORT LAUDERDALE FL 33359 City-State-Zip: FORT LAUDERDALE FL 33359

Title Title **PRESIDENT TREASURER** 

Name MCDERMOTT, JUDY Name LEGG, LISA Address PO BOX 590456 Address PO BOX 590456

City-State-Zip: FORT LAUDERDALE FL 33359 City-State-Zip: FORT LAUDERDALE FL 33359

Title DIRECTOR Title **DIRECTOR** 

Name SHARON, MESSAM Name GRANT, CURLINE Address 5451 STATE ROAD 7 Address 5451 STATE ROAD 7

City-State-Zip: FORT LAUDERDALE FL 33359 City-State-Zip: FORT LAUDERDALE FL 33359

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: KAREN MORRIS-CLARKE

SECRETARY

04/16/2024

**FILED** Apr 16, 2024

**Secretary of State** 

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