

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15000011609

Entity Name: INSPIRED BY QUEENS, INC.**Current Principal Place of Business:**5943 106TH TERRACE NORTH
PINELLAS PARK , FL 33782**Current Mailing Address:**5943 106TH TERRACE NORTH
PINELLAS PARK , FL 33782 US**FEI Number:** 47-3863300**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**UNITED STATES CORPORATION AGENTS, INC.
5943 106TH TERRACE NORTH
PINELLAS PARK , FL 33782 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 CHAIRMAN, BOARD OF DIRECTORS
Name BRINSON-SPEARMAN, LENORE
Address 5943 106TH TERRACE NORTH
City-State-Zip: PINELLAS PARK FL 33782

Title ASST. TREASURER, BOARD OF DIRECTORS
Name KNIGHT, MYRONICA
Address 5943 106TH TERRACE NORTH
City-State-Zip: PINELLAS PARK FL 33782

Title OFFICER, DIRECTOR OF PUBLIC RELATIONS
Name BYRD, MONEEKE
Address 5943 106TH TERRACE NORTH
City-State-Zip: PINELLAS PARK FL 33782

Title TREASURER, BOARD OF DIRECTORS
Name TURNER, PATRALYNN
Address 5943 106TH TERRACE NORTH
City-State-Zip: PINELLAS PARK FL 33782

Title SECRETARY, BOARD OF DIRECTORS
Name SHAHEED, CHANEL MS.
Address 5943 106TH TERRACE NORTH
City-State-Zip: PINELLAS PARK FL 33782

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: MYRONICA KNIGHT**TREASURER****03/28/2018**_____
Electronic Signature of Signing Officer/Director Detail_____
Date