## 2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16000007066

Entity Name: SOUTH MIAMI BLACK CULTURAL AFFAIRS FOUNDATION, INC

FILED
Mar 14, 2018
Secretary of State
CC8263551283

Date

Date

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

6250 SW 60TH AVE SOUTH MIAMI, FL 33143

## **Current Mailing Address:**

6250 SW 60TH AVE

SOUTH MIAMI. FL 33143 US

FEI Number: 81-2392254 Certificate of Status Desired: Yes

## Name and Address of Current Registered Agent:

SOUTH MIAMI FL 33143

KELLY, LEVY 6420 SW 57TH CT SOUTH MIAMI, FL 33143 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: LEVY KELLY 03/14/2018

City-State-Zip:

SOUTH MIAMI FL 33143

Electronic Signature of Registered Agent

Officer/Director Detail:

City-State-Zip:

Address

 Title
 PRESIDENT
 Title
 2ND VICE PRESIDENT

 Name
 POWELL, DEBORAH CHRISTINE
 Name
 KELLY, ANNETTA

Address 6250 SW 60TH AVE Address 6250 SW 60TH AVE

Title SECRETARY Title TREASURER

NameMARCEL, CATHYANANamePRICE, JOYCE DR.Address6250 SW 60TH AVEAddress6250 SW 60TH AVE

City-State-Zip: SOUTH MIAMI FL 33143 City-State-Zip: SOUTH MIAMI FL 33143

Title 1ST VICE PRESIDENT Title BUSINESS MANAGER

Name GRIFFIN, WINSTON Name KELLY, LEVY

Address 6250 SW 60TH AVE Address 6250 SW 60TH AVE

City-State-Zip: SOUTH MIAMI FL 33143 City-State-Zip: SOUTH MIAMI FL 33143

Title CHAPLAIN/PARLIAMENTARIAN

6250 SW 60TH AVE

Name CALEY, JOSHUA BISHOP

City-State-Zip: SOUTH MIAMI FL 33143

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: LEVY KELLY REGISTERED AGENT 03/14/2018

Electronic Signature of Signing Officer/Director Detail