

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N16000009536

**Entity Name:** CAMANAISTRINGS, INC.

**Current Principal Place of Business:**

931 VILLAGE BLVD  
SUITE #905-467  
WEST PALM BEACH, FL 33409

**Current Mailing Address:**

931 VILLAGE BLVD  
SUITE #905-467  
WEST PALM BEACH, FL 33409 US

**FEI Number: 81-4011080**

**Certificate of Status Desired: Yes**

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

LOCKE-WILLIAMS, ERIKA B.  
407 SOUTH MANGONIA CIRCLE  
WEST PALM BEACH, FL 33401 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:** ERIKA LOCKE-WILLIAMS

04/17/2022

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title CEO, PRESIDENT  
Name WILLIAMS, CAMEREN ANAI  
Address 931 VILLAGE BLVD  
SUITE #905-467  
City-State-Zip: WEST PALM BEACH FL 33409

Title VP, TREASURER  
Name LOCKE-WILLIAMS, ERIKA BERNICE  
Address 931 VILLAGE BLVD  
SUITE #905-467  
City-State-Zip: WEST PALM BEACH FL 33409

Title VP  
Name WILLIAMS, EUSEBIUS KENYETTE  
Address 931 VILLAGE BLVD  
SUITE #905-467  
City-State-Zip: WEST PALM BEACH FL 33409

Title DIRECTOR  
Name LOCKE, WENDELL T.  
Address 931 VILLAGE BLVD  
SUITE #905-467  
City-State-Zip: WEST PALM BEACH FL 33409

Title SECRETARY  
Name WATSON, LINA  
Address 931 VILLAGE BLVD  
SUITE #905-467  
City-State-Zip: WEST PALM BEACH FL 33409

Title SECRETARY  
Name COPELAND, STACEY L.  
Address 931 VILLAGE BLVD  
SUITE #905-467  
City-State-Zip: WEST PALM BEACH FL 33409

Title OFFICER  
Name KNIGHT, CHERYL  
Address 931 VILLAGE BLVD  
SUITE 905-467  
City-State-Zip: WEST PALM BEACH FL 33409

Title DIRECTOR  
Name MCDONALD, KENDRA M  
Address 931 VILLAGE BLVD  
SUITE #905-467  
City-State-Zip: WEST PALM BEACH FL 33409

*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:** ERIKA LOCKE-WILLIAMS

VP

04/17/2022

Electronic Signature of Signing Officer/Director Detail

Date