

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

DOCUMENT# N21000013463

**FILED**  
**Feb 02, 2022**  
**Secretary of State**  
**1302251751CC**

**Entity Name:** THE ASSOCIATION OF CARIBBEAN WOMEN WRITERS AND SCHOLARS, INC.

**Current Principal Place of Business:**

3000 NE 151ST STREET,  
DEPT. OF ENGLISH, AC1, STE. 347, FL INT UN  
NORTH MIAMI, FL 33181

**Current Mailing Address:**

3000 NE 151ST STREET,  
DEPT. OF ENGLISH, AC1, STE. 347, FL INT UN  
NORTH MIAMI, FL 33181 US

**FEI Number: 87-3818067**

**Certificate of Status Desired: No**

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

WEIR-SOLEY, DONNA MAXINE  
3000 NE 151ST STREET,  
DEPT. OF ENGLISH, AC1, STE. 347, FL INT UN  
NORTH MIAMI, FL 33181 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:** DONNA MAXINE WEIR-SOLEY 02/02/2022  
Electronic Signature of Registered Agent Date

**Officer/Director Detail :**

Title P  
Name WEIR-SOLEY, DONNA MAXINE  
Address 3000 NE 151ST STREET,SUITE 347  
City-State-Zip: NORTH MIAMI FL 33181

Title VP  
Name CAROL BAILEY  
Address 3000 NE 151ST STREET, SUITE 347  
City-State-Zip: NORTH MIAMI FL 33181

Title S  
Name DANIELE BOBB  
Address 3000 NE 151ST STREET, SUITE 347  
City-State-Zip: NORTH MIAMI FL 33181

Title PE  
Name MARIE ALEXANDER CORNELIUS  
Address 3000 NE 151ST STREET, SUITE 347  
City-State-Zip: NORTH MIAMI FL 33181

Title SMP  
Name MARISSSEL HERNANDEZ ROMERO  
Address 3000 NE 151ST STREET, SUTE 347  
City-State-Zip: NORTH MIAMI FL 33181

Title T  
Name ALLISON E. FRANCIS  
Address 3000 NE 151ST STREET, SUITE 347  
City-State-Zip: NORTH MIAMI FL 33181

Title A  
Name MICHAEL GRAFALS  
Address 3000 NE 151ST STREET,  
DEPT. OF ENGLISH, AC1, STE. 347, FL  
INT UN  
City-State-Zip: NORTH MIAMI FL 33181

*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:** WEIR-SOLEY , DONNA MAXINE 02/02/2022  
Electronic Signature of Signing Officer/Director Detail Date