2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 11, 2016
Secretary of State
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Entity Name: THE CENTER FOR MULTICULTURAL WELLNESS AND PREVENTION, INC.

Current Principal Place of Business:

641 NORTH RIO GRANDE AVE.
ORLANDO, FL 32805

Current Mailing Address:

641 NORTH RIO GRANDE AVE.
ORLANDO, FL 32805

FEI Number: 59-3368679

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

FRANCOIS, MARIE J
2542 FLETCH CT
LAKE MARY, FL 32746 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	BOARD CHAIR
Name	SLAFF, JILL
Address	3113 CRANES COVE LOOP
City-State-Zip:	KISSIMMEE FL 34741

Title	VICE CHAIR
Name	DIAL, NATASHA
Address	8816 VALENCIA OAKS CT
City-State-Zip:	ORLANDO FL 32825

Title	TREASURER
Name	MILLER CAMPANELLA, TEMPRA
Address	4700 MILLENIA BLVD
City-State-Zip:	WINDERMERE FL 32839

Title	D
Name	SAMEDY, FRANCINE
Address	12941 COLONNADE CIRCLE.
City-State-Zip:	CLERMONT FL 34711

Title	SECRETARY
Name	MILLER, PHILLIP
Address	660 BROADDOAK LOOP
City-State-Zip:	SANFORD FL 32771

Title	PRESIDENT/CEO
Name	FRANCOIS, MARIE J DR.
Address	641 NORTH RIO GRANDE AVE.
City-State-Zip:	ORLANDO FL 32805

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: MARIE-JOSE FRANCOIS PRESIDENT/CEO 03/11/2016

Electronic Signature of Signing Officer/Director Detail — Date