2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 11, 2023
Secretary of State
9355177610CC

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Entity Name: THE CENTER FOR MULTICULTURAL WELLNESS AND PREVENTION, INC.

Current Principal Place of Business:

1685 LEE ROAD
SUITE 200
WINTER PARK, FL 32789

Current Mailing Address:

1685 LEE ROAD, SUITE 200
WINTER PARK, FL 32789 US

FEI Number: 59-3368679

Certificate of Status Desired: No

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	MICHAEL, DEY
Address	521 VENTRIS COURT
City-State-Zip:	MAITLAND FL 32751

Title	SECRETARY
Name	ROMAN, WENDY
Address	5052 HARTWELL CT
City-State-Zip:	SAINT CLOUD FL 34771

Title	DIRECTOR
Name	PINEDO-ROLON, GIORGINA PHD
Address	10524 MOSS PARK RD. STE 204-258
City-State-Zip:	ORLANDO FL 32832

Title	PRESIDENT/CEO
Name	FRANCOIS, MARIE J DR.
Address	1685 LEE ROAD SUITE 200
City-State-Zip:	WINTER PARK FL 32789

Title	TREASURER
Name	JETT, SWANNIE PHD
Address	600 PALERMO VISTA CT
City-State-Zip:	LONGWOOD FL 32750

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 JOSE FRANCOIS PRESIDENT/CEO 04/11/2023

Electronic Signature of Signing Officer/Director Detail — Date