

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 765958

FILED
Mar 13, 2014
Secretary of State
CC3721310722

Entity Name: FLORIDA HIGH SCHOOLS MODEL UNITED NATIONS, INC.

Current Principal Place of Business:

4356 BENT TREE BLVD
SARASOTA, FL 34241

Current Mailing Address:

544 AURORA STREET
SOUTH DAYTONA, FL 32119 US

FEI Number: 59-2274688

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

EFFIOM-DAUW, HAKIM
4760 NEPTUNE DR SE
SAINT PETERSBURG, FL 33705 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: HAKIM EFFIOM-DAUW

03/13/2014

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CEO
Name GEBHARDT, CHRIS
Address 544 AURORA STREET
City-State-Zip: SOUTH DAYTONA FL 32119

Title ED
Name MORELL, CASEY
Address 4419 BAYBREEZE RD
City-State-Zip: ORLANDO FL 32808

Title DEA
Name GARCIA, JENNIFER
Address 8169 STONE LEAF LANE
City-State-Zip: TAMPA FL 33647

Title SPBT
Name SUTLIFF, BRIAN
Address 4356 BENT TREE BLVD
City-State-Zip: SARASOTA FL 34241

Title SG
Name ABDULWAKEEL, AMANA
Address 10781 CABBAGE TREE LOOP
City-State-Zip: ORLANDO FL 32825

Title RA
Name EFFIOM-DAUW, HAKIM
Address 4760 NEPTUNE DR SE
City-State-Zip: SAINT PETERSBURG FL 33705

Title DD
Name LEWIS, GRANT
Address 1341 BRANCH HILL CT
City-State-Zip: APOPKA FL 32712

Title DO
Name BOWMAN, ALISON
Address 60 BIRCHCREST BLVD
City-State-Zip: PORT CHARLOTTE FL 33954

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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: HAKIM EFFIOM-DAUW

REGISTERED AGENT

03/13/2014

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title RS
Name BALLESTIN, LUCAS
Address 355 STOCKTON STREET
4A
City-State-Zip: BROOKLYN FL 11206

Title BM
Name SMITH, LIZ
Address 411 N BRIGGS AVE
406
City-State-Zip: SARASOTA FL 34237

Title BM
Name SRINIVASAN, ASVIN
Address 185 CANAL ST
City-State-Zip: SHELTON FL 06484

Title BM
Name TERRY, PATRICK
Address 2434 SHERBROOKE RD
City-State-Zip: WINTER PARK FL 32792