#### 2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 765958** 

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

FILED Mar 20, 2016 Secretary of State CC0034039091

## **Current Principal Place of Business:**

332 BEARDED OAKS CIRCLE SARASOTA, FL 34232

### **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 03/20/2016

Electronic Signature of Registered Agent

Date

SARASOTA FL 34232

#### Officer/Director Detail:

Title CEO Title ED

NameGEBHARDT, CHRISNameMORELL, CASEYAddress544 AURORA STREETAddress4419 BAYBREEZE RDCity-State-Zip:SOUTH DAYTONA FL 32119City-State-Zip:ORLANDO FL 32808

Title DEA Title SPBT

Name GARCIA, JENNIFER Name SUTLIFF, BRIAN

Address 5100 BURCHETTE RD Address 332 BEARDED OAKS CIRCLE

City-State-Zip:

#3001

Title

City-State-Zip: TAMPA FL 33647

Title RA

Name ABDULWAKEEL, AMANA Address 4760 NEPTUNE DR SE

Address 10781 CABBAGE TREE LOOP City-State-Zip: SAINT PETERSBURG FL 33705

City-State-Zip: ORLANDO FL 32825

Title Di

Title DD Name BOWMAN, ALISON
Name LEWIS, GRANT

Address 60 BIRCHCREST BLVD

Address 1341 BRANCH HILL CT City-State-Zip: PORT CHARLOTTE FL 33954
City-State-Zip: APOPKA FL 32712

Continues on page 2

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 03/20/2016

Electronic Signature of Signing Officer/Director Detail

Date

# Officer/Director Detail Continued:

Title RS

Name BALLESTIN, LUCAS

Address 355 STOCKTON STREET

4

City-State-Zip: BROOKLYN FL 11206

Title BM

Name SMITH, LIZ

Address 1919 TOUCAN WAY

**UNIT 311** 

City-State-Zip: SARASOTA FL 34232

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