

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12000006032

Entity Name: BAHAMAS NATIONAL TRUST FUND, INC.**Current Principal Place of Business:**6401 LYONS ROAD
COCONUT CREEK, FL 33073**Current Mailing Address:**6401 LYONS ROAD
COCONUT CREEK, FL 33073 US**FEI Number: 37-1697045****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**PRICE, DAVID T ESQ
6401 LYONS ROAD
COCONUT CREEK, FL 33073 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	D
Name	ROBERTSON, MACGREGOR
Address	PO BOX N 4010
City-State-Zip:	NASSAU, BAHAMAS

Title	DIRECTOR
Name	PRICE, DAVID T ESQ.
Address	6401 LYONS ROAD
City-State-Zip:	COCONUT CREEK FL 33073

Title	D
Name	ARRINGTON, MARVIN
Address	4982 EGRET COURT
City-State-Zip:	COCONUT CREEK FL 33073

Title	DIRECTOR
Name	FOWLER, ANDY
Address	MONTAGE AVE BOX N-9599 #7
City-State-Zip:	NASSAU BAHAMAS

Title	D
Name	WASILEWSKI, JOE
Address	24305 SW 142 AVE.
City-State-Zip:	PRINCETON FL 33032

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: DAVID T PRICE**DIRECTOR****02/26/2019**_____
Electronic Signature of Signing Officer/Director Detail_____
Date