2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 08, 2001 8:00 am
Secretary of State
02-08-2001 90372 007 ****61.25

0050986

DOCUMENT # N00000000140

1. Entity Name

ASSOCIATION FOR THE ADVANCEMENT OF UGANDAN AMERI

Principal Place of Business	Mailing Address
12203 BRISBANE LANE WELLINGTON FL 33414	PO BOX 20675 W. PALM BEACH FL 33416

J10794

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 65-1007558 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

OTENGHO, SUNDAY-JOSEPH
#150, 500 N. CONGRESS AVE.
WEST PALM BEACH FL 33401-2918

7. Name and Address of New Registered Agent

Name: OTENGHO, SUNDAY-JOSEPH
Street Address (P.O. Box Number is Not Acceptable): 12203 BRISBANE LANE
City: WELLINGTON FL Zip Code: 33414-5533

8. 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 _____ 02/04/01
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/D Dr. Sunday-Joseph Otengho 12203 Brisbane Lane Wellington, FL 33414-5533 ☐ Change XX Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V/CFO/D Carol R. Otengho 12203 Brisbane Lane Wellington, FL 33414-5533 ☐ Change XX Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S/D Margaret Anne Wampamba 2424 Dew Meadow Court Herndon, VA 20171 ☐ Change XX Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T/D Nicholas Kalanzi 2044 Birchwood Avenue Chicago, IL 60645 ☐ Change XX Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V/D Nancy Bunyenyezi Gray 5064 Pine Abbey Drive South West Palm Beach, FL 33415 ☐ Change XX Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	C/D David T. Mureeba 5720 LBJ Freeway, Suite 420 Dallas, TX 75240 ☐ Change XX Addition

CR2E037 (10/00)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED 02/04/01 561-357-7664
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

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Attachment
916794
N00000000140

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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Dr. Emmanuel Kintu 115 Bennington Commons Court St. Louis, MO 63146-2595	☐ Change ☒ Additio
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Mr. Ben Nyende 1023 Archibald, Apt. G Ontario, CA 91764	☐ Change ☒ Additio
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Father Francis Tebangura 2301 Pontoon Road Granite City, IL 62040	☐ Change ☒ Additio
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Additio
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SIGNATURE: SIGNATURE REQUIRED