

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000007279

FILED  
Apr 27, 2008  
Secretary of State

**Entity Name:** AFRICAN AMERICAN ECONOMIC DEVELOPMENT COUNCIL, INC.

**Current Principal Place of Business:**

5824 BEE RIDGE RD. # 446  
SARASOTA, FL 34233

**New Principal Place of Business:**

2525 ARTHURS COURT LANE  
TALLAHASSEE, FL 32301

**Current Mailing Address:**

5824 BEE RIDGE RD. # 446  
SARASOTA, FL 34233

**New Mailing Address:**

2525 ARTHURS COURT LANE  
TALLAHASSEE, FL 32301

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WARD, LONNIE JR  
5824 BEE RIDGE RD. # 446  
SARASOTA, FL 34233 US

**Name and Address of New Registered Agent:**

WARD, LONNIE JR  
2525 ARTHURS COURT LANE  
TALLAHASSEE, FL 32301 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: LONNIE WARD, JR.

04/27/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PSD ( ) Delete  
Name: WARD, LONNIE JR.  
Address: 5824 BEE RIDGE RD. # 446  
City-St-Zip: SARASOTA, FL 34233

Title: D ( ) Delete  
Name: WARD, TYSHAUN L  
Address: 5824 BEE RIDGE RD. # 446  
City-St-Zip: SARASOTA, FL 34233

Title: D ( ) Delete  
Name: GREEN, DEBORAH  
Address: 5824 BEE RIDGE RD. # 446  
City-St-Zip: SARASOTA, FL 34233

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PSD (X) Change ( ) Addition  
Name: WARD, LONNIE JR.  
Address: 2525 ARTHURS COURT LANE  
City-St-Zip: TALLAHASSEE, FL 32301

Title: D (X) Change ( ) Addition  
Name: WARD, TYSHAUN L  
Address: 2525 ARTHURS COURT LANE  
City-St-Zip: TALLAHASSEE, FL 32301

Title: D (X) Change ( ) Addition  
Name: GREEN, DEBORAH  
Address: 2525 ARTHURS COURT LANE  
City-St-Zip: TALLAHASSEE, FL 32301

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: LONNIE WARD, JR.

PSD

04/27/2008

Electronic Signature of Signing Officer or Director

Date