2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 17, 2004 8:00 am
Secretary of State
05-17-2004 90007 042 ****61.25

DOCUMENT # N02000001598

1. Entity Name
USA/AFRICA INSTITUTE, INC.

24075750

04052004 Chg-NP CR2E037 (10/03)

Principal Place of Business	Mailing Address
204 S MONROE ST SUITE 203 TALLAHASSEE, FL 32301	204 S MONROE ST SUITE 203 TALLAHASSEE, FL 32301

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 ~~APPLIED FOR~~ 01-0624598 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
~~MBATHA, MANDLA~~ Peter Harris 204 S MONROE ST SUITE 203 TALLAHASSEE, FL 32301	Name: Peter Harris Street Address (P.O. Box Number is Not Acceptable): 204 S. Monroe St. Ste 203 City: Tallahassee FL Zip Code: 32301

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. I am familiar with, and accept the obligations of registered agent.

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

Filing Fee is $61.25
Due by May 1, 2004

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

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD ~~SMITH, JERALDINE W~~ 204 S MONROE ST TALLAHASSEE, FL 32301	☑ Delete	PD Matthew Meadows 204 S. Monroe St., Ste. 203 Tall. FL 32301	☑ Change	☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD ~~MBATHA, MANDLA~~ 204 S MONROE ST TALLAHASSEE, FL 32301	☑ Delete	TD Donna Elam 204 S. Monroe St., Ste. 203 Tall FL 32301	☑ Change	☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD ~~MEADOWS, MATTHEW~~ 4380 NW 11TH ST LAUDERHILL, FL 33313	☑ Delete	SD Elizabeth Gianini 204 S. Monroe St., Ste. 203 Tall FL 32301	☑ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change	☐ Addition

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: _____ 4-30-04 224-4600
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #