

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

DOCUMENT# N95000003480

**FILED**  
**Mar 03, 2016**  
**Secretary of State**  
**CC7375029691**

**Entity Name:** EDO ASSOCIATION OF FLORIDA INCORPORATED

**Current Principal Place of Business:**

1021 NW 185 DR  
MIAMI GARDENS, FL 33169

**Current Mailing Address:**

P.O. BOX 69-4413  
MIAMI, FL 33269-1413 US

**FEI Number:** 65-0550278

**Certificate of Status Desired:** No

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

IZEVBIGIE, SCOTTY OZIEGBE  
1021 NW 185 DR  
MIAMI GARDENS, FL 33169 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:** SCOTTY IZEBIGIE

03/03/2016

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PRES  
Name IZEBIGIE, SCOTTY OZIEGBE  
Address 1021 NW 185 DR  
City-State-Zip: MIAMI GARDENS FL 33169

Title V.P.  
Name OGIEMWANYE, OSA  
Address 19640 NE 12 AVENUE  
City-State-Zip: MIAMI FL 33179

Title SEC  
Name IMAFIDON, TAIWO  
Address 15772 SW 24 STREET  
City-State-Zip: MIRAMAR FL 33027

Title TREASURER  
Name IMASUEN, EMMANUEL  
Address 563 NE 163 STREET  
City-State-Zip: N.MIAMI FL 33162

Title ASST. SECRETARY  
Name ISIBOR, PETER  
Address 1518 EVERGREEN HOLLOW LANE  
City-State-Zip: CONYERS GA 30012

Title SPEA  
Name IMAFIDON, TAIWO  
Address 15772 SW 24 STREET  
City-State-Zip: MIRAMAR FL 33027

Title PUB. SECRETARY  
Name ODIETE, ROBERT  
Address 29325 SW 182ND AVENUE  
City-State-Zip: MIAMI FL 33030

Title FIN. SECRETARY  
Name UHUNMWANGHO, EGHOSA  
Address 4495 SW 179TH WAY  
City-State-Zip: MIRAMAR FL 33029

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*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:** SCOTTY OZIEGBE IZEBIGIE

PRESIDENT

03/03/2016

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title           SOC. SECRETARY  
Name           OJEABULU, ABRAHAM  
Address        4001 ROCKS POINT PLACE  
City-State-Zip: WEST PALM BEACH FL 33407