

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000003480

FILED
Apr 07, 2024
Secretary of State
6970494542CC

Entity Name: EDO ASSOCIATION OF FLORIDA INCORPORATED

Current Principal Place of Business:

12761 SW 45TH DRIVE,
MIAMAR, FL 33027

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:

OJO, PATRICK
12761 SW 45TH DRIVE
MIRAMAR, FL 33027 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: PATRICK OJO

04/07/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title SECRETARY
Name TUNJI, CLAYTON
Address 563 NE 163 STREET
City-State-Zip: NORTH MIAMI FL 33162

Title PRESIDENT
Name OJO, PATRICK DR.
Address 12761 SW 45TH DRIVE
City-State-Zip: HOLLYWOOD FL 33027

Title SOCIAL SECRETARY
Name IZEBBIGIE, DESMOND OSAYANDE
Address 777 NE 34 AVENUE
City-State-Zip: HOMESTEAD FL 33033

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

Title PUBLICITY SECRETARY
Name OHENHEN, WESLEY
Address 5300 NW 189 STREET
City-State-Zip: MIAMI GARDENS FL 33055

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

Title SPEAKER
Name URHOGHIDE, ISIAIAH
Address 15766 SW 26TH STREET
City-State-Zip: MIRAMAR FL 33027

Title FINANCIAL SECRETARY
Name IZEBBIGIE, SCOTTY O DR.
Address 1021 NW 185 DRIVE
City-State-Zip: MIAMI GARDENS FL 33169

Continues on page 2

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: DR. SCOTTY IZEBBIGIE

FINANCIAL SECRETARY

04/07/2024

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title WELFARE OFFICER
Name LAWANI, NOSA
Address 3030 NW 203 TERRACE
City-State-Zip: MIAMI GARDENS FL 33056