

# 2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N00000002742

FILED  
Jul 01, 2008  
Secretary of State

**Entity Name:** AFRICAN AMERICAN CULTURE CLUB, INC. OF TAMPA

**Current Principal Place of Business:**

1312 N. 17TH STREET  
TAMPA, FL 33605

**New Principal Place of Business:**

**Current Mailing Address:**

3106 E. LAKE AVENUE  
TAMPA, FL 33610

**New Mailing Address:**

FEI Number: 59-3644753      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

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

AIKENS, DARYL  
3106 EAST LAKE AVENUE  
TAMPA, FL 33610      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: DARYL AIKENS

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: AIKENS, YVONNE J  
Address: 3106 EAST LAKE AVENUE  
City-St-Zip: TAMPA, FL 33610

Title: D ( ) Delete  
Name: AIKENS, NICOLE T  
Address: 3106 EAST LAKE AVENUE  
City-St-Zip: TAMPA, FL 33610

Title: D ( ) Delete  
Name: AIKENS-GUZMAN, LA CHERYL  
Address: 2404 WOODY TRACE LN  
City-St-Zip: TAMPA, FL 33612

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: YVONNE AIKENS

D

07/01/2008

Electronic Signature of Signing Officer or Director

Date