

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 30, 2009  
Secretary of State**

DOCUMENT# N01000005259

Entity Name: AFRICAN - AMERICAN GIRLS ACTIVELY PURSUING EXCELLENCE, INC.

**Current Principal Place of Business:**

18 COLLEGE ST.  
EATONVILLE, FL 32751

**New Principal Place of Business:**

**Current Mailing Address:**

18 COLLEGE ST.  
EATONVILLE, FL 32751

**New Mailing Address:**

FEI Number: 95-4893839      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

ALLEN, RITA  
18 NORTH COLLEGE ST.  
EATONVILLE, FL 34761      US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: ALLEN, RITA  
Address: 18 NORTH COLLEGE ST.  
City-St-Zip: EATONVILLE, FL 34761

Title: VD ( ) Delete  
Name: ALLEN, TRUDI  
Address: 2639 CLEAR LAKE CIR  
City-St-Zip: ORLANDO, FL 32816

Title: STD ( ) Delete  
Name: PARSON, BEVERLY  
Address: 918 OBSERVATORY CT.  
City-St-Zip: ORLANDO, FL 32818

**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: RITA ALLEN

PD

04/30/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date