

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000007195

FILED  
Apr 30, 2008  
Secretary of State

Entity Name: NIGERIAN-AMERICAN FOUNDATION, INC.

**Current Principal Place of Business:**

17847 NW 27TH AVE  
MIAMI, FL 33054

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 693247  
MIAMI, FL 33269

**New Mailing Address:**

FEI Number: 65-1145145

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

OSOLASE, ANDREW U  
10101 NW MIAMI COURT  
MIAMI SHORES, FL 33150 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: PRES ( ) Delete  
Name: OSOLASE, ANDREW U  
Address: 10101 NW MIAMI COURT  
City-St-Zip: MIAMI SHORES, FL 33150

Title: VP ( ) Delete  
Name: OBADEYI, JOSEPH  
Address: 17847 NW 27TH AVENUE  
City-St-Zip: MIAMI, FL 33054

Title: SEC ( ) Delete  
Name: AYODELE, AKINREMI  
Address: 17847 NW 27TH AVENUE  
City-St-Zip: MIAMI, FL 33054

Title: TRES ( ) Delete  
Name: URUEJOMA, CAROLINE  
Address: 17847 NW 27TH AVENUE  
City-St-Zip: MIAMI, FL 33054

Title: FSEC ( ) Delete  
Name: IDOWU, AYOADE  
Address: 17847 NW 27TH AVENUE  
City-St-Zip: MIAMI, FL 33054

Title: PRO ( ) Delete  
Name: KAZEEM, NIKE  
Address: 17847 NW 27TH AVENUE  
City-St-Zip: MIAMI, FL 33054

**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:

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: ANDREW OSOLASE

PRES

04/30/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date