

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000007803

FILED  
Jun 03, 2008  
Secretary of State

**Entity Name:** INTERNATIONAL ACADEMY OF AFRICAN BUSINESS AND DEVELOPMENT, INC.

## Current Principal Place of Business:

MURRAY STATE UNIVERSITY  
109 BUSINESS BUILDING  
MURRAY, KY 42071

## New Principal Place of Business:

86 MAIN STREET  
SOUTH GLASTONBURY, CT 060730029 US

## Current Mailing Address:

MURRAY STATE UNIVERSITY  
109 BUSINESS BUILDING  
MURRAY, KY 42071

## New Mailing Address:

P.O. BOX 29  
SOUTH GLASTONBURY, CT 060730029 US

**FEI Number:** 01-0731322 **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:

KOLO, JERRY  
3222 NW 22 AVENUE  
FORT LAUDERDALE, FL 33309 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: MUUKA, GERRY DR.  
Address: MSU, 109 BUSINESS BUILDING  
City-St-Zip: MURRAY, KY 42071 US

Title: VD ( ) Delete  
Name: ENYINDA, CHRIS DR.  
Address: ALABAMA A&M UNIVERSITY  
City-St-Zip: NORMAL, AL 35762 US

Title: VTD ( ) Delete  
Name: SCHROTH, PETER W DR.  
Address: 86 MAIN STREET  
City-St-Zip: SOUTH GLASTONBURY, CT 06073 US

Title: D ( ) Delete  
Name: AIYEKU, JOSEPH DR.  
Address: 352 LAFAYETTE STREET (BUSINESS DEPT.)  
City-St-Zip: SALEM, MA 01970 US

Title: D ( ) Delete  
Name: NWANKWO, SONNY DR.  
Address: 1150 DOUGLAS PIKE (MARKETING DEPT.)  
City-St-Zip: SMITHFIELD, RI 02917 US

Title: D ( ) Delete  
Name: OGBUEHI, ALPHONSO DR.  
Address: 1150 DOUGLAS PIKE (MARKETING DEPT.)  
City-St-Zip: SMITHFIELD, RI 02917 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: ENYINDA, CHRIS DR.  
Address: ALABAMA A&M UNIV. SOB, 4900 MERIDIAN ST  
City-St-Zip: NORMAL, AL 35762 US

Title: VD (X) Change ( ) Addition  
Name: OWUSU-FRIMPONG, NANA DR.  
Address: LONDON METRO UNIV SCH BUS 31 JEWRY STREET  
City-St-Zip: LONDON, UK EC3N 2EY UK

Title: VTD (X) Change ( ) Addition  
Name: SCHROTH, PETER W DR.  
Address: 86 MAIN STREET, P.O. BOX 29  
City-St-Zip: SOUTH GLASTONBURY, CT 060730029 US

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: PETER W. SCHROTH

VP

06/03/2008

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

\_\_\_\_\_  
Date