

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000002051

FILED  
Apr 30, 2007  
Secretary of State

Entity Name: U.S. AFRICAN ECONOMIC GROWTH OPPORTUNITY ASSOCIATION, INC.

**Current Principal Place of Business:**

4250 SAN JUAN AVENUE  
JACKSONVILLE, FL 32210

**New Principal Place of Business:**

6999-2 MERILL ROAD  
181  
JACKSONVILLE, FL 32277

**Current Mailing Address:**

4250 SAN JUAN AVENUE  
JACKSONVILLE, FL 32210

**New Mailing Address:**

6999-2 MERILL ROAD  
181  
JACKSONVILLE, FL 32277

FEI Number:                      FEI Number Applied For ( )                      FEI Number Not Applicable (X)                      Certificate of Status Desired ( )

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

NYAGAH KARIUKI, SIMON  
4250 SAN JUAN AVENUE  
JACKSONVILLE, FL 32210    US

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

NYAGAH KARIUKI, SIMON  
6999-2 MERILL ROAD  
181  
JACKSONVILLE, FL 32277 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: \_\_\_\_\_ Date: 04/30/2007  
Electronic Signature of Registered Agent

**OFFICERS AND DIRECTORS:**

Title: CD                      ( ) Delete  
Name: NYAGAH, SIMON KARIUKI  
Address: 4250 SAN JUAN AVENUE  
City-St-Zip: JACKSONVILLE, FL 32210

Title: SD                      ( ) Delete  
Name: MUTUA BROWN, SUSAN  
Address: 14012 BEARGRASS COURT  
City-St-Zip: WINTER GARDEN, FL 34787

Title: TD                      ( ) Delete  
Name: MUTHONI OTWOMA, ADRIENNE  
Address: 1920 STABLE DRIVE APT. #3-202  
City-St-Zip: ORLANDO, FL 32837

Title: D                      ( ) Delete  
Name: MUNAITA, LISA WANJA  
Address: 1920 STABLE DRIVE APT.#3-202  
City-St-Zip: ORLANDO, FL 32837

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

Title: CD                      (X) Change ( ) Addition  
Name: NYAGAH, SIMON KARIUKI  
Address: 6999-2 MERILL ROAD 181  
City-St-Zip: JACKSONVILLE, FL 32277

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: SIMON KARIUKI NYAGAH                      CD                      04/30/2007  
Electronic Signature of Signing Officer or Director                      Date