

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000003745

FILED
Jan 29, 2011
Secretary of State

Entity Name: AFRICA INTERNATIONAL UNIVERSITY FOUNDATION, INC.

Current Principal Place of Business:

5309 TECHNOLOGY DRIVE
TAMPA, FL 33647

New Principal Place of Business:

Current Mailing Address:

5309 TECHNOLOGY DRIVE
TAMPA, FL 33647

New Mailing Address:

FEI Number: 20-2700393

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ACKEY, DODE A
4602 ASHBURN SQUARE DRIVE
TAMPA, FL 33610 US

Name and Address of New Registered Agent:

ACKEY, DODE A
11730 BRENFORD CREST DRIVE
RIVERVIEW, FL 33579 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: DODE ACKEY

01/29/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DIRE
Name: LOCANDER, WILLIAM B PH.D.
Address: 12542 MISSION HILLS CIRCLE SOUTH
City-St-Zip: JACKSONVILLE, FL 32225 US

Title: DIRE
Name: PRESCOTT, LINDA PH.D.
Address: 3402 AMBERJACK DRIVE
City-St-Zip: HERNANDO BEACH, FL 34607

Title: DIRE
Name: LAMB, BOB
Address: 16020 WYNDOVER ROAD
City-St-Zip: TAMPA, FL 33647

Title: DIRE
Name: LAMB, DIANE
Address: 16020 WYNDOVER ROAD
City-St-Zip: TAMPA, FL 33647

Title: DIRE
Name: CARTER III, ROBERT
Address: CMR 489 BOX 1589
City-St-Zip: APO, AE 09751

Title: DIRE
Name: NG, LILY
Address: 1371 67TH STREET
City-St-Zip: BROOKLYN, NY 11219

I hereby 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 all other like empowered.

SIGNATURE: DODE ACKEY

FOUN

01/29/2011

Electronic Signature of Signing Officer or Director

Date