

2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Jul 19, 2007
Secretary of State

DOCUMENT# N03000009322

Entity Name: THE IGBO CULTURAL ASSOCIATION INCORPORATED (OBINWANNE)**Current Principal Place of Business:**300 SOUTH PINE ISLAND ROAD
248
PLANTATION, FL 33324**New Principal Place of Business:**3500 GATEWAY DRIVE
#205
POMPANO BEACH, FL 33069**Current Mailing Address:**300 SOUTH PINE ISLAND ROAD
248
PLANTATION, FL 33324**New Mailing Address:**3500 GATEWAY DRIVE
#205
POMPANO BEACH, FL 33069**FEI Number:** 86-1087613**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**INNOCENT O CHINWEZE, P.A.
300 SOUTH PINE ISLAND ROAD
SUITE 248
PLANTATION, FL 33324 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:** P () Delete
Name: ANYAGALIGBO, CHRISTOHPER U
Address: 1340 NW 198 STREET
City-St-Zip: MIAMI, FL 33169**Title:** VP () Delete
Name: ANYADIKE, STEPHEN
Address: 300 SOUTH PINE ISLAND ROAD SUITE 248
City-St-Zip: PLANTATION, FL 33324**Title:** GS () Delete
Name: ODOH, MCCHESTER PROFF
Address: 300 SOUTH PINE ISLAND RD., STE 248
City-St-Zip: PLANTATION, FL 33324**Title:** AS () Delete
Name: ODOH, CHESTER PROF
Address: 300 SOUTH PINE ISLAND ROAD SUITE 248
City-St-Zip: PLANTATION, FL 33324**Title:** FS () Delete
Name: MENIRU, EMMANUEL
Address: 300 SOUTH PINE ISLAND ROAD SUITE 248
City-St-Zip: PLANTATION, FL 33324**Title:** T () Delete
Name: WILSON, ROBINSON
Address: 300 SOUTH PINE ISLAND ROAD SUITE 248
City-St-Zip: PLANTATION, FL 33324**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** VP (X) Change () Addition
Name: ANYADIKE, STEPHEN
Address: 3500 GATEWAY DRIVE #205
City-St-Zip: POMPANO BEACH, FL 33069**Title:** GS (X) Change () Addition
Name: ODOH, MCCHESTER PROFF
Address: 3500 GATEWAY DRIVE #205
City-St-Zip: POMPANO BEACH, FL 33069**Title:** AS (X) Change () Addition
Name: ODOH, CHESTER PROF
Address: 3500 GATEWAY DRIVE #205
City-St-Zip: POMPANO BEACH, FL 33069**Title:** FS (X) Change () Addition
Name: MENIRU, EMMANUEL
Address: 3500 GATEWAY DRIVE #205
City-St-Zip: POMPANO BEACH, FL 33069**Title:** T (X) Change () Addition
Name: WILSON, ROBINSON
Address: 3500 GATEWAY DRIVE #205
City-St-Zip: POMPANO BEACH, FL 33069

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: CHRIS ANYAGALIGBO

P

07/19/2007

Electronic Signature of Signing Officer or Director

Date