

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000009322

FILED
Mar 23, 2010
Secretary of State

Entity Name: THE IGBO CULTURAL ASSOCIATION INCORPORATED (OBINWANNE)

Current Principal Place of Business:

3500 GATEWAY DRIVE
#205
POMPANO BEACH, FL 33069

New Principal Place of Business:

Current Mailing Address:

3500 GATEWAY DRIVE
#205
POMPANO BEACH, FL 33069

New Mailing Address:

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
Name: ODOH, MCCHESTER DR
Address: 1799 NE 164TH ST, SUITE 103,
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: VP
Name: IKE, FELIX
Address: 3500 GATEWAY DRIVE #205
City-St-Zip: POMPANO BEACH, FL 33069

Title: GS
Name: UKPO, DAVID
Address: 3500 GATEWAY DRIVE #205
City-St-Zip: POMPANO BEACH, FL 33069

Title: FS
Name: UMEH, CHRIS
Address: 3500 GATEWAY DRIVE #205
City-St-Zip: POMPANO BEACH, FL 33069

Title: T
Name: OKANY, IKEMEFUNA
Address: 3500 GATEWAY DRIVE #205
City-St-Zip: POMPANO BEACH, FL 33069

Title: CD
Name: UMUNNAKWE, CYRIL
Address: 3500 GATEWAY DRIVE #205
City-St-Zip: POMPANO BEACH, FL 33069

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: MCCHESTER ODOH

P

03/23/2010

Electronic Signature of Signing Officer or Director

Date