

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000000098

FILED
May 01, 2007
Secretary of State

Entity Name: AFRICAN AMERICAN ARTS COUNCIL, INC.

Current Principal Place of Business:

1622 - 1624 CENTRAL AVENUE
ST. PETERSBURG, FL 33712

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 13035
ST. PETERSBURG, FL 33733

New Mailing Address:

FEI Number: 13-4274317 **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:

Name and Address of New Registered Agent:

MOBLEY, RAYNETTA
1622-24 CENTRAL AVE.
ST. PETERSBURG, FL 33712 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CPD () Delete
Name: MOBLEY, RAYNETTA
Address: 1622 - 1624 CENTRAL AVENUE
City-St-Zip: ST. PETERSBURG, FL 33712

Title: VD () Delete
Name: HAFIZ, SAYIDA
Address: 1622 - 1624 CENTRAL AVENUE
City-St-Zip: ST. PETERSBURG, FL 33712

Title: SD () Delete
Name: ROGERS, SHABAZZ
Address: 1622 - 24 CENTRAL AVENUE
City-St-Zip: ST. PETERSBURG, FL 33712

Title: TD () Delete
Name: DANESHPOUR, MALISSIA
Address: 1622 - 1624 CENTRAL AVEUE
City-St-Zip: ST. PETERSBURG, FL 33712

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: MALISSIA DANESHPOUR

TD

05/01/2007

Electronic Signature of Signing Officer or Director

Date