

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000000098

FILED  
Apr 30, 2009  
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 ( )**

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

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

04/30/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date