


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2005 8:00 am
Secretary of State

05-03-2005 90131 047 ****70.00

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DOCUMENT # N04000008659					
1. Entity Name WORLD AFRICAN CULTURAL UNION/USA, INC.					
Principal Place of Business 2119 DELTA BOULEVARD TALLAHASSEE, FL 32303			Mailing Address 2119 DELTA BOULEVARD TALLAHASSEE, FL 32303		
2. Principal Place of Business		3. Mailing Address <i>2131 N. Meridian Rd</i>		04262005 Chg-NP CR2E037 (10/03)	
Suite, Apt. #, etc.		Suite, Apt. #, etc. <i>Apt 219</i>		4. FEI Number	
City & State		City & State <i>Tallahassee, Florida</i>		Applied For <input checked="" type="checkbox"/> Not Applicable	
Zip	Country	Zip	Country	5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
		<i>32303</i>	<i>USA</i>		
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
HAYNES, ALBERT ZAID 2119 DELTA BOULEVARD TALLAHASSEE, FL 32303			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			City		
			State FL Zip Code		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE <u><i>Albert Zaid Haynes</i></u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
				Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	P	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HAYNES, ALBERT ZAID			NAME	
STREET ADDRESS	2119 DELTA BOULEVARD			STREET ADDRESS	
CITY-ST-ZIP	TALLAHASSEE, FL 32303			CITY-ST-ZIP	
TITLE	VT	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MITCHELL, MIAISHA			NAME	
STREET ADDRESS	8416 LULA LN			STREET ADDRESS	
CITY-ST-ZIP	TALLAHASSEE, FL 32309			CITY-ST-ZIP	
TITLE	V	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HENRY, MARIA			NAME	
STREET ADDRESS	5408 TOURAIN DR			STREET ADDRESS	
CITY-ST-ZIP	TALLAHASSEE, FL 32308			CITY-ST-ZIP	
TITLE	S	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HAYNES, AMANDLA			NAME	
STREET ADDRESS	8416 LULA LN			STREET ADDRESS	
CITY-ST-ZIP	TALLAHASSEE, FL 32309			CITY-ST-ZIP	
TITLE	D	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HENRY, LIONEL			NAME	
STREET ADDRESS	5408 TOURAIN DR			STREET ADDRESS	
CITY-ST-ZIP	TALLAHASSEE, FL 32308			CITY-ST-ZIP	
TITLE	D	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HEYWARD, MARVELLE			NAME	
STREET ADDRESS	2175 FRANKFORT AVE APT K-203			STREET ADDRESS	
CITY-ST-ZIP	TALLAHASSEE, FL 32405			CITY-ST-ZIP	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u><i>Albert Zaid Haynes</i></u>		<i>(ALBERT ZAID HAYNES)</i>		Date: <i>04/26/05</i>	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date</small>		<small>Daytime Phone #</small>	

(850) 385-9007 x 25