

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000011096

FILED  
Mar 31, 2007  
Secretary of State

**Entity Name:** ASSOCIATION OF SIERRA LEONEANS IN NORTH FLORIDA, INC.

**Current Principal Place of Business:**

2945 GOLDEN POND BLVD  
ORANGE PARK, FL 32073

**New Principal Place of Business:**

**Current Mailing Address:**

2945 GOLDEN POND BLVD  
ORANGE PARK, FL 32073

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

NGAUJA, TAMBA  
2945 GOLDEN POND BLVD  
ORANGE PARK, FL 32073 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: TAMBA, NGAUJA  
Address: 2945 GOLDEN POND BLVD  
City-St-Zip: ORANGE PARK, FL 32073

Title: VP ( ) Delete  
Name: ALHAJI, BARRIE  
Address: 848 COLONIAL CT. W.  
City-St-Zip: JACKSONVILLE, FL 32225

Title: T ( ) Delete  
Name: TAMBA, MOMORIE  
Address: 4138 CLEARBROOK COVE RD.  
City-St-Zip: JACKSONVILLE, FL 32218

Title: S ( ) Delete  
Name: MELICENT, SAMA  
Address: 4090 BROAD CREEK LANE  
City-St-Zip: JACKSONVILLE, FL 32218

**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 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: TAMBA NGAUJA

PRES

03/31/2007

Electronic Signature of Signing Officer or Director

Date