

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000011096

FILED  
Mar 08, 2010  
Secretary of State

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

**Current Principal Place of Business:**

4050 BROAD CREEK LN  
JACKSONVILLE, FL 32218

**New Principal Place of Business:**

4090 BROAD CREEK LN  
JACKSONVILLE, FL 32218

**Current Mailing Address:**

4050 BROAD CREEK LN  
JACKSONVILLE, FL 32218

**New Mailing Address:**

4090 BROAD CREEK LN  
JACKSONVILLE, FL 32218

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

MOMORIE, TAMBA M  
4138 CLEARBROOK COVE RD  
JACKSONVILLE, FL 32218 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: SAMA, MILLICENT  
Address: 4090 BROAD CREEK LN  
City-St-Zip: JACKSONVILLE, FL 32218

Title: VP  
Name: JUSU, MICHAEL  
Address: 1140 SUNRAY CT  
City-St-Zip: JACKSONVILLE, FL 32218

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

Title: S  
Name: KARGBO, UMI  
Address: 10336 WALNUT BEND N  
City-St-Zip: JACKSONVILLE, FL 32257

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: TAMBA M MOMORIE

FIN.

03/08/2010

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

\_\_\_\_\_  
Date