

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000011096

FILED
Mar 17, 2012
Secretary of State

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

Current Principal Place of Business:

4090 BROAD CREEK LN
JACKSONVILLE, FL 32218

New Principal Place of Business:

4138 CLEARBROOK COVE ROAD
JACKSONVILLE, FL 32218

Current Mailing Address:

4090 BROAD CREEK LN
JACKSONVILLE, FL 32218

New Mailing Address:

4138 CLEARBROOK COVE ROAD
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: MOMORIE, TAMBA
Address: 4138 CLEARBROOK COVE ROAD
City-St-Zip: JACKSONVILLE, FL 32218

Title: VP
Name: BARRY, MOHAMED
Address: 848 BROOKVIEW DRIVE N.
City-St-Zip: JACKSONVILLE, FL 32225

Title: T
Name: KAMARA, MARGARET M
Address: 3065 TOWER OAKS DRIVE
City-St-Zip: ORANGE PARK, FL 32065

Title: S
Name: BANGURA, OUSMAN
Address: 1417 KINGFISHER LANE N.
City-St-Zip: JACKSONVILLE, FL 32218

Title: SS
Name: KAMANDA, SANDI
Address: 9974 TIMBER FALLS LANE
City-St-Zip: JACKSONVILLE, 32

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

P

03/17/2012

Electronic Signature of Signing Officer or Director

Date