2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 07, 2009
Secretary of State

DOCUMENT# N07000010977

Entity Name: UBENWANNE SOCIAL CLUB OF CENTRAL FLORIDA, INC.

Current Principal Place of Business:

1615 RIDGEWOOD AVE #103
HOLY HILL, FL 32117

New Principal Place of Business:

Current Mailing Address:

1615 RIDGEWOOD AVE #103
HOLY HILL, FL 32117

New Mailing Address:

FEI Number: 26-1424421 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

OGBURIA, I.J. WESLEY ESQ
934 N MAGNOLIA AVE STE 225
ORLANDO, FL 32803 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: CD ( ) Delete
Name: EMEJURU, OKECHUKWU
Address: 1615 RIDGEWOOD AVE #103
City-St-Zip: HOLY HILL, FL 32117

Title: S ( ) Delete
Name: OKORIKE, CHRISTIAN
Address: 4430 MARTINS WAY #F
City-St-Zip: ORLANDO, FL 32808

Title: S ( ) Delete
Name: OBIUKWU, SIMEON
Address: 7456 PENRILL COURT
City-St-Zip: ORLANDO, FL 32818

Title: T ( ) Delete
Name: AIHE, JOHN
Address: 151 PINE ISLES DRIVE
City-St-Zip: SANFORD, FL 32773

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: OKECHUKWU EMEJURU CD 04/07/2009

Electronic Signature of Signing Officer or Director — Date