

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000005568

FILED  
Mar 28, 2009  
Secretary of State

Entity Name: AFRICAN NETWORK OF SOUTHWEST FLORIDA, INC

**Current Principal Place of Business:**

3009 64TH STREET WEST  
LEHIGH ACRES, FL 33971

**New Principal Place of Business:**

**Current Mailing Address:**

3009 64TH STREET WEST  
LEHIGH ACRES, FL 33971

**New Mailing Address:**

FEI Number: 26-2805050

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

SMITH, ANGELINA  
2713 73RD STREET WEST  
LEHIGH ACRES, FL 33971 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: PRES ( ) Delete  
Name: WOKOCHA, EZE  
Address: 3917 5TH STREET WEST  
City-St-Zip: LEHIGH ACRES, FL 33971 US

Title: VP ( ) Delete  
Name: ADJEI-BEDIAICO, COLLINS  
Address: 3009 64TH STREET WEST  
City-St-Zip: LEHIGH ACRES, FL 33971 US

Title: SEC ( ) Delete  
Name: EHINDERO, FEMI  
Address: 9712 CASA LINDA COURT  
City-St-Zip: FORT MYERS, FL 33919 US

Title: TRE ( ) Delete  
Name: VOSSAH, KOKOU  
Address: 7580 OMNI LANE APT 106  
City-St-Zip: FORT MYERS, FL 33905 US

**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: FEMI EHINDERO

SEC

03/28/2009

Electronic Signature of Signing Officer or Director

Date