

**2011 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N09000005271

**FILED  
Nov 21, 2011  
Secretary of State**

**Entity Name:** NKWERRE DAUGHTERS ASSOCIATION - USA INC.

**Current Principal Place of Business:**

601 N HART BLVD  
ORLANDO, FL 32818

**New Principal Place of Business:**

**Current Mailing Address:**

601 N HART BLVD  
ORLANDO, FL 32818

**New Mailing Address:**

**FEI Number:** 27-0241034      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

NNADI, FIDELIA  
601 N HART BLVD  
ORLANDO, FL 32818, FL 32818      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: FIDELIA NNADI

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: NNADI, FIDELIA PHD  
Address: 601 N HART BLVD  
City-St-Zip: ORLANDO, FL 32818

Title: VP  
Name: NWACHUKWU, THESSY  
Address: 11728 S WILCREST DR  
City-St-Zip: HOUSTON, TX 77099

Title: S  
Name: OMEKAM, IJEOMA  
Address: 211 MAPLE PATH PLACE  
City-St-Zip: THE WOODLANDS, TX 77382

Title: T  
Name: AKANO, ELSIE IHUOMA  
Address: 11015 SHADOW BROOK LANE  
City-St-Zip: FRISCO, TX 75035

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: FIDELIA NNADI

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

P

11/21/2011

\_\_\_\_\_  
Date