

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000007395

FILED
Jun 04, 2010
Secretary of State

Entity Name: AFRICAN HERITAGE CULTURAL ARTS CENTER, INC.

Current Principal Place of Business:

6161 N. W. 22ND AVENUE
MIAMI, FL 33142

New Principal Place of Business:

Current Mailing Address:

6161 N. W. 22ND AVENUE
MIAMI, FL 33142

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

THOMPCKINS, CHARLAYNE W
6161 N. W. 22ND AVENUE
MIAMI, FL 33142 US

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: CHAI
Name: BLACK, JONATHAN R
Address: 14951 ROYAL OAKS LN, APT 1804
City-St-Zip: MIAMI, FL 33181

Title: VCHA
Name: MUSTAFA, MELTON S
Address: 2820 N. W. 179 STREET
City-St-Zip: MIAMI GARDENS, FL 33056

Title: SEC
Name: LOCKHART, CAROLINE
Address: 3091 THAMES WAY
City-St-Zip: MIRAMAR, FL 33025

Title: TREA
Name: THOMPCKINS, CHARALYNE W
Address: 20001 N. W. 63RD AVENUE
City-St-Zip: MIAMI, FL 33015

Title: MEM
Name: RUSH, JAMES A
Address: 6651 COW PIN ROAD
City-St-Zip: MIAMI LAKES, FL 33016

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: CHARLAYNE W. THOMPCKINS

TREA

06/04/2010

Electronic Signature of Signing Officer or Director

Date