

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000011533

FILED  
Jul 26, 2012  
Secretary of State

Entity Name: NGO HESED INC.

## Current Principal Place of Business:

2678 SAINT JOHNS BLUFF RD S APT 515  
JACKSONVILLE, FL 32246

## New Principal Place of Business:

8025 BAYMEADOWS CIRCLE EAST  
601  
JACKSONVILLE, FL 32256

## Current Mailing Address:

2678 SAINT JOHNS BLUFF RD S APT 515  
JACKSONVILLE, FL 32246

## New Mailing Address:

8025 BAYMEADOWS CIRCLE EAST  
601  
JACKSONVILLE, FL 32256

FEI Number: 80-0615319

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KOUADIO, FRANCIS S  
2678 SAINT JOHNS BLUFF RD S APT 515  
JACKSONVILLE, FL 32246 US

## Name and Address of New Registered Agent:

KOUADIO, FRANCIS S  
8025 BAYMEADOWS CIRCLE EAST  
601  
JACKSONVILLE, FL 32256 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:

07/26/2012

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: P  
Name: KOUADIO, FRANCIS  
Address: PO BOX 56781  
City-St-Zip: JACKSONVILLE, FL 32241

Title: V  
Name: BAMBA, MARIAM  
Address: PO BOX 56781  
City-St-Zip: JACKSONVILLE, FL 32241

Title: S  
Name: DIALLO, ADAMA  
Address: PO BOX 56781  
City-St-Zip: JACKSONVILLE, FL 32241

Title: T  
Name: NDIAYE, BIGUE  
Address: PO BOX 56781  
City-St-Zip: JACKSONVILLE, FL 32241

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: FRANCIS S KOUADIO

P

07/26/2012

Electronic Signature of Signing Officer or Director

Date