

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N22003

FILED
Jun 18, 2009
Secretary of State

Entity Name: IBO ASSOCIATION OF SOUTH FLORIDA (IGWE BU IKE) INC.

Current Principal Place of Business:

135 NW 163RD
MIAMI, FL 33169

New Principal Place of Business:

Current Mailing Address:

1558 WINDSHIP CIRCLE
WELLINGTON, FL 33414

New Mailing Address:

FEI Number: 65-0046738 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **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:

IBEZIM, MICHAEL U
1558 WINDSHIP CIRCLE
WELLINGTON, FL 33414 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: D () Delete
Name: OGUGUA, CHARLES I PRESIDE
Address: P. O. BOX 290792
City-St-Zip: DAVIE, FL 33329

Title: D () Delete
Name: IBEZIM, MICHAEL U VP
Address: 1558 WINDSHIP CIRCLE
City-St-Zip: WELLINGTON, FL 33414

Title: D () Delete
Name: NWADIGO, OKECHUKWU SECRETA
Address: 4722 SUNSET LANE, APT. C
City-St-Zip: WEST PALM BEACH, FL 33415

Title: D () Delete
Name: ALUM, PETER
Address: 19234 NW 80 CT
City-St-Zip: MIAMI LAKES, FL 33015

Title: D () Delete
Name: JOHNSON, ISAAC
Address: 135 NW 163RD STREET
City-St-Zip: MIAMI, FL 33169

Title: D () Delete
Name: MADU, JULIUS
Address: 135 NW 163RD STREET
City-St-Zip: MIAMI, FL 33169

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
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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: MICHAEL IBEZIM

D

06/18/2009

Electronic Signature of Signing Officer or Director

Date