## 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N32454

FILED Apr 05, 2012 Secretary of State

Entity Name: AFRICAN AMERICAN CULTURAL ARTS ORGANIZATION, INC.

US

Current Principal Place of Business: New Principal Place of Business:

610 S. MANGONIA CIRCLE WEST PALM BEACH, FL 33401

Current Mailing Address: New Mailing Address:

POST OFFICE BOX 1702 WEST PALM BEACH, FL 334021702

FEI Number: 65-0126760 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

EDWARD GOLSON 610 S. MANGONIA CIRCLE W. PALM BEACH, FL 33401

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: F

Name: GOLSON, EDWARD
Address: 610 S MANGONIA CIR.
City-St-Zip: W. PALM BEACH, FL 33401

Title: 7

Name: BENNETT, BEVINS JR.
Address: 2923 AVNEUE FBLVD.
City-St-Zip: RIVIERA BEACH, FL 33404

Title: V

Name: ROBINSON, ELIZABETH P Address: 620 W 34TH STREET City-St-Zip: RIVIERA BEACH, FL 33404

Title:

 Name:
 STEVE, WHITE

 Address:
 808 W. 1ST STREET

 City-St-Zip:
 RIVIERA BCH, FL 33404

Title: S

Name: ILES, ANN

Address: 321 W 30TH STREET
City-St-Zip: RIVIERA BEACH, FL 33404

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: EDWARD GOLSON P 04/05/2012