

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N37216

FILED
May 01, 2006
Secretary of State

Entity Name: ASHANTI CULTURAL ARTS & ENRICHMENT, INC.

Current Principal Place of Business:

2650 SISTRUCK BLVD
FT. LAUDERDALE, FL 33311 US

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 491856
LAUDERDALE LAKES, FL 33349 US

New Mailing Address:

FEI Number: 65-0209351 **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:

FILINGS, INC.
3732 NORTHWEST 16TH STREET
FT. LAUDERDALE, FL 33311 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: JONES, LINDA H
Address: 2900 N.COURSE DR BLG 53 #110
City-St-Zip: POMPANO BEACH, FL 33069

Title: P () Delete
Name: FLECTCHER, JOANN
Address: 245 NW 117 ST
City-St-Zip: CORAL SPRINGS, FL 33071

Title: T () Delete
Name: THOMPSON, EDITH
Address: 301 N PINE ISLAND RD. #257
City-St-Zip: PLANTATION, FL 33324

Title: T () Delete
Name: BROWN, SHERI
Address: 507 GARDENS DR. STE 240
City-St-Zip: POMPANO BEACH, FL 33069

Title: T () Delete
Name: ABEL, GRACE
Address: 2875 N.E. 29TH STREET
City-St-Zip: FT. LAUDERDALE, FL 33306

Title: T () Delete
Name: JOHNSON, NOVICE
Address: 1576 N. W. 7TH AVENUE
City-St-Zip: POMPANO, FL 33360

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: P (X) Change () Addition
Name: FLECTCHER, JOE ANN
Address: 245 NW 117 ST
City-St-Zip: CORAL SPRINGS, FL 33071

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
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: LINDA HOUSTON JONES

D

05/01/2006

Electronic Signature of Signing Officer or Director

Date