2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N37216

FILED Apr 30, 2009 Secretary of State

Entity Name: ASHANTI CULTURAL ARTS & ENRICHMENT, INC.

Current Principal Place of Business:		New Principal Place of Business:	
2230 N.W FT.LAUDE	. 21 AVE. ERDALE, FL 33062 US		
Current Mailing Address:		New Mailing Address:	
P. O. BOX LAUDERE	(491856 DALE LAKES, FL 33349 US		
FEI Number	:: 65-0209351 FEI Number Applied For () FEI N	Number Not Applicable	() Certificate of Status Desired ()
Name and	d Address of Current Registered Agent:	Name and Add	ress of New Registered Agent:
FT. LAUD	RTHWEST 16TH STREET ERDALE, FL 33311 US e named entity submits this statement for the purpose	e of changing its reg	istered office or registered agent, or both,
	e of Florida.		
SIGNATU	Electronic Signature of Registered Agent		Date
OFFICER	S AND DIRECTORS:	ADDITIONS/CH	IANGES TO OFFICERS AND DIRECTOR
Title: Name: Address: City-St-Zip:	D () Delete JONES, LINDA H 3499 OAKS WAY POMPANO BEACH, FL 33069	Address: 3499	(X) Change()Addition ES, LINDA H 9 OAKS WAY BUILDING 117 APT 708 IPANO BEACH, FL 33069
Title: Name: Address: City-St-Zip:	P () Delete FLETCHER, JOE ANN 245 NW 117 ST CORAL SPRINGS, FL 33071	Title: Name: Address: City-St-Zip:	()Change ()Addition
Title: Name:	T () Delete BROWN, SHERI	Title: Name:	() Change () Addition
	507 GARDEN DR. POMPANO BEACH, FL 33069	Address: City-St-Zip:	
Address: City-St-Zip: Title: Name: Address: City-St-Zip:	507 GARDEN DR.	Address:	()Change ()Addition
City-St-Zip: Title: Name: Address:	507 GARDEN DR. POMPANO BEACH, FL 33069 T () Delete ADAMS, PAMELA 210 NW 6 AVE.	Address: City-St-Zip: Title: Name: Address:	() Change () Addition () Change () Addition

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: LINDA H. JONES D 04/30/2009