

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N38600

FILED  
Jan 06, 2004  
Secretary of State

Entity Name: AFRICAN-AMERICAN LEADERSHIP COUNCIL, INC.

**Current Principal Place of Business:**

354 JACKSON STREET  
DUNEDIN, FL 34698

**New Principal Place of Business:**

**Current Mailing Address:**

354 JACKSON STREET  
DUNEDIN, FL 34698

**New Mailing Address:**

FEI Number: 59-3047645

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

HABEEB-ULLAH, BILAL F.  
354 JACKSON STREET  
DUNEDIN, FL 34698 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: PD ( ) Delete  
Name: HABEEB-ULLAH, BILAL, F.  
Address: 354 JACKSON ST.  
City-St-Zip: DUNEDIN, FL

Title: D ( ) Delete  
Name: ELLIOT, BERNICE  
Address: 1428 OVERLEA STREET  
City-St-Zip: CLEARWATER, FL

Title: D ( ) Delete  
Name: ABDUR-RAHIM, MUHAMMAD  
Address: 1028 NORTH MADISON AVE  
City-St-Zip: CLEARWATER, FL 33755

Title: STD ( ) Delete  
Name: ELLIOT, ANNETTE E  
Address: 1428 OVERLEA STREET  
City-St-Zip: CLEARWATER, FL 33755

Title: D ( ) Delete  
Name: BIREDA, MARTHA R  
Address: PO BOX 10171 N/A  
City-St-Zip: TAMPA, FL

**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  
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 Section 119.07(3)(i), 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: BILAL F. HABEEB-ULLAH

PD

01/06/2004

Electronic Signature of Signing Officer or Director

Date