

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N38679

FILED  
Jan 26, 2005  
Secretary of State

**Entity Name:** SOUTH FLORIDA GUYANESE ASSOCIATION, INC.

**Current Principal Place of Business:**

5048 SW 130TH TERRACE  
MIRAMAR, FL 33027

**New Principal Place of Business:**

3120 NW 88TH AVE  
#304  
SUNRISE, FL 33351

**Current Mailing Address:**

5048 SW 130TH TERRACE  
MIRAMAR, FL 33027

**New Mailing Address:**

3120 NW 88TH AVE  
#304  
SUNRISE, FL 33351

**FEI Number:** 65-0201288

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

HYMAN, GEORGE R.  
4200 NW 35 AVENUE  
LAUDERDALE HILLS, FL 33309 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: BAKER, COLIN  
Address: 5048 SW 130TH TERRACE  
City-St-Zip: MIRAMAR, FL 33027

Title: SD ( ) Delete  
Name: WRIGHT, VICTOR  
Address: 82 GABLES BLVD.  
City-St-Zip: WESTON, FL 33326

Title: VPD ( ) Delete  
Name: GILES, ANTHONY  
Address: 19381 SW 2ND STREET  
City-St-Zip: PEMBROKE PINES, FL 33029

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: WILSON, AVRIL P  
Address: 3120 NW 88TH AVE, #304  
City-St-Zip: SUNRISE, FL 33351

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

Title: VPD (X) Change ( ) Addition  
Name: BAKER, COLIN  
Address: 5048 SW 130TH TERRACE  
City-St-Zip: MIRAMAR, FL 33027

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: COLIN BAKER

VPD

01/26/2005

Electronic Signature of Signing Officer or Director

Date