

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000004245

FILED
Jun 20, 2010
Secretary of State

Entity Name: GHANAIAAN ASSOCIATION OF SOUTH FLORIDA, INC.

Current Principal Place of Business:

5460 NORTH STATE ROAD 7
120
NORTH LAUDERDALE, FL 33319 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 101076
FT. LAUDERDALE, FL 33310

New Mailing Address:

P O BOX 827452
PEMBROKE PINES, FL 33082

FEI Number: 65-0438024

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANDERSON, ROBERT A PR
2106 NW 171ST TERRACE
PEMBROKE PINES, FL 33028 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: PR
Name: MARK, NTEM A
Address: 438 9TH STREET
City-St-Zip: WEST PALM BEACH, FL 33401 US

Title: VP
Name: HAWA, SEIDU-BERG
Address: 12945 SW 28TH COURT
City-St-Zip: MIRAMAR, FL 33027

Title: TD
Name: JAMES, QUAYE
Address: 15982 NW 21ST STREET
City-St-Zip: PEMBROKE PINES, FL 33028

Title: SC
Name: BEATRICE, AYEBAH
Address: 699 NW 156TH AVENUE
City-St-Zip: PEMBROKE PINES, FL 33028

Title: QM
Name: ADIIZA, BUCARY
Address: 14094 GREENTREE TRAIL
City-St-Zip: WELLINGTON, FL 33414

Title: PRO
Name: GLADYS, OPPONG-TETTEH
Address: 4301 SW 160TH AVENUE #104
City-St-Zip: MIRAMAR, FL 33027

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: MARK NTEM

PR

06/20/2010

Electronic Signature of Signing Officer or Director

_____ Date