

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # N94000001225

1. Entity Name

LIBERIAN ASSOCIATION OF SOUTH FLORIDA, INC.



**FILED**  
**Mar 22, 2004 08:00 AM**  
**Secretary of State**

Principal Place of Business

P.O. BOX 8026  
FT LAUDERDALE FL 33310  
US

Mailing Address

P.O. BOX 8026  
FT LAUDERDALE FL 33310  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



MOORE

CR2E037 (11/03)

4. FEI Number

65-0481178

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

FLAH, CHERYL  
724 NEW LAKE DR.  
BOYNTON BEACH FL 33426

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25**

**Due By May 1, 2004**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE ☐ Delete

NAME PD  
STREET ADDRESS MASSAQUOI, PATRIK  
CITY - ST - ZIP 2211 SW 43RD WAY  
FORT LAUDERDALE FL 33317

TITLE ☐ Delete

NAME VPD  
STREET ADDRESS PATTERSON, JAMES  
CITY - ST - ZIP 1740 WINDORAH WAY APT F  
WEST PALM BEACH FL 33411

TITLE ☐ Delete

NAME S  
STREET ADDRESS WILLIAMS, AMY M  
CITY - ST - ZIP 6603 CONSTANCE ST  
LAKE WORTH FL 33467

TITLE ☐ Delete

NAME YANKOON, JOE N  
STREET ADDRESS A-520 NW 36 ST 408  
CITY - ST - ZIP LAUDERDALE LAKES FL 33319

TITLE ☐ Delete

NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ Delete

NAME  
STREET ADDRESS  
CITY - ST - ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition

NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ Change ☐ Addition

NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ Change ☐ Addition

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TITLE ☐ Change ☐ Addition

NAME  
STREET ADDRESS  
CITY - ST - ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Joe N. Yankoon* 3-18-04

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #