

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N94000001225

FILED
Jan 15, 2009
Secretary of State

Entity Name: LIBERIAN ASSOCIATION OF SOUTH FLORIDA, INC.

Current Principal Place of Business:

1430 AVON STREET
APT.#37
NORTH LAUDERDALE, FL 33310 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 8026
FT LAUDERDALE, FL 33310 US

New Mailing Address:

P.O. BOX 8471
FT LAUDERDALE, FL 33310 US

FEI Number: 65-0481178 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

MORLU, FRANCIS P
291 SARATOGA BLVD E
ROYAL PALM BEACH, FL 33411 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: JOE N. YANKOON

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: S () Delete
Name: WILLIAMS, AMY M
Address: 6603 CONSTANCE ST
City-St-Zip: LAKE WORTH, FL 33467

Title: T () Delete
Name: JALLEBA, CHRIS
Address: 7308 NW 57TH DR
City-St-Zip: TAMARAC, FL 33321

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: T (X) Change () Addition
Name: JALLEBA, CHRIS
Address: 7308 NW 57TH DR
City-St-Zip: TAMARAC, FL 33321 US

Title: D () Change (X) Addition
Name: YANKOON, JOE N SR.
Address: P.O. BOX 8471
City-St-Zip: FT. LAUDERDALE, FL 33310 US

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: JOE YANKOON

D

01/15/2009

Electronic Signature of Signing Officer or Director

Date