

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000005652

FILED
Mar 30, 2010
Secretary of State

Entity Name: AFRICAN AMERICAN CHAMBER OF COMMERCE OF CENTRAL FLORIDA, INC.

Current Principal Place of Business:

315 E. ROBINSON STREET
100
ORLANDO, FL 32801 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 2389
ORLANDO, FL 32802

New Mailing Address:

FEI Number: 59-3314330

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WYCHE, PAUL
ONE LANDMARK CENTER
315 E. ROBINSON STREET, SUITE 100
ORLANDO, FL 32801 US

Name and Address of New Registered Agent:

SPOONEY, ROBERT M DR.
ONE LANDMARK CENTER
315 E. ROBINSON STREET, SUITE 100
ORLANDO, FL 32801 US

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: ROBERT M. SPOONEY

03/30/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D
Name: WYCHE, PAUL
Address: 2920 LOWELL CT.
City-St-Zip: CASSELBERRY, FL 32707 US

Title: CD
Name: ROGERS, RONALD O
Address: 1310 W. COLONIAL DRIVE, SUITE 19
City-St-Zip: ORLANDO, FL 32804 US

Title: T
Name: IKEJI, CHUCK
Address: 801 N. MAGNOLIA AVE., STE. 302
City-St-Zip: ORLANDO, FL 32803 US

Title: SD
Name: STONE, STANLEY
Address: 8600 VALENCIA COLLEGE LANE
City-St-Zip: ORLANDO, FL 32825 US

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: ROBERT M SPOONEY

RA

03/30/2010

Electronic Signature of Signing Officer or Director

Date