2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000004078

FILED Apr 28, 2009 Secretary of State

Entity Name: FEDERAL COUNCIL OF NIGERIANS IN SOUTH FLORIDA, INC.

Current Principal Place of Business: New Principal Place of Business: 2151 NE 168 STREET 7775 GRANADA BLVD. APT 10 MIRAMAR, FL 33023 NORTH MIAMI BEACH, FL 33162 **New Mailing Address: Current Mailing Address:** 2151 NE 168 STREET 7775 GRANADA BLVD APT 10 MIRAMAR, FL 33023 NORTH MIAMI BEACH, FL 33162 FEI Number: 65-0607944 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: EYO, BUFFER E 15121 SW 154TH COURT MIAMI, FL 33196 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition EYO. BUFFER E Name: IHEM, CHUCK Name: 15121 SW 154TH CT Address: 7775 GRANADA BLVD. Address: MIRAMAR, FL 33023 City-St-Zip: MIAMI, FL 33196 City-St-Zip: Title: Title: () Delete () Change () Addition IKPEINYANG, BASSEY Name: Name: Address: 15401 NE 6TH AVE APT B-124 Address: City-St-Zip: MIAMI, FL 33162 City-St-Zip: Title: () Delete Title: () Change () Addition UKPAI, EMMANUEL Name: Name: Address: 4700 NW 12TH CT Address: City-St-Zip: LAUDERHILL, FL 33313 City-St-Zip: () Delete Title: Title: () Change () Addition Name: AJAYI, KUNLE Name: 9111 ANDORA DR Address: Address: City-St-Zip: MIRAMAR, FL 33025 City-St-Zip: Title: () Delete Title: () Change () Addition OKECHUWKU, GODWIN Name: Name: 2151 NE 168TH ST SUITE 10 Address: Address: City-St-Zip: NORTH MIAMI BEACH, FL 33162 City-St-Zip: Title: () Delete Title: () Change (X) Addition OJUKWU OBL Name: Name: Address: Address: 18777 N.W. 78TH PLACE MIAMI, FL 33015 City-St-Zip: City-St-Zip:

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: CHUCK IHEM P/D 04/28/2009