2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N9600000529

FILED Apr 28, 2004 Secretary of State

Entity Name: GUYANA AMERICAN CULTURAL ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 3301 3RD AVENUE NORTH ST. PETERSBURG, FL 33713 **Current Mailing Address: New Mailing Address:** 3301 3RD AVENUE NORTH ST. PETERSBURG, FL 33713 FEI Number: 65-0765320 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: JAIMANGAL, MADO 6598 18 STREET NORTH ST. PETERSBURG, FL FL33702 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete JAIMANGAL, MADO Name: Name: 6598 18TH STREET NORTH Address: Address: City-St-Zip: ST. PETERSBURG, FL 33702 City-St-Zip: Title: VD Title: () Delete () Change () Addition Name: CORBIE, PHYLLIS Name: Address: 4109 52ND AVE S Address: City-St-Zip: ST PETE, FL City-St-Zip: Title: () Delete Title: (X) Change () Addition RAMCHARRAN, JASODRA Name: POWELL, DIANNE F Name: 243 KATHERINE BLVD, APT 5103 8110 CAROLL BLVD Address: Address: City-St-Zip: PALM HARBOR, FL 34684 City-St-Zip: TAMPA, FL 33619 () Delete Title: STD Title: (X) Change () Addition Name: RAMCHARRAN, JASODRA Name: RAMCHARRAN, JASODRA Address: 243 KATHERINE RD Address: 243 KATHERINE RD City-St-Zip: PALM HARBOR, FL 34684 City-St-Zip: PALM HARBOR, FL 34684

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MADO JAIMANGAL P 04/28/2004