

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000002551

FILED  
Jan 06, 2006  
Secretary of State

**Entity Name:** ASSOCIATION OF FILIPINO-AMERICAN COMMUNITIES, INC., FL. U.S.A.

**Current Principal Place of Business:**

2323 SE 33RD PL  
OCALA, FL 34471

**New Principal Place of Business:**

**Current Mailing Address:**

2323 SE 33RD PL  
OCALA, FL 34471

**New Mailing Address:**

**FEI Number:** 52-1997971

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

REPIEDAD, AGUINALDO L III  
2323 SE 33RD PL  
OCALA, FL 34471 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:

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: BODE, MIDES  
Address: 1035 NE 32ND TERR  
City-St-Zip: OCALA, FL 34470

Title: D ( ) Delete  
Name: LOPEZ, LEO  
Address: 2922 SE 24TH AVENUE  
City-St-Zip: OCALA, FL 34471

Title: D ( ) Delete  
Name: RAMOS, POMPEY B  
Address: 2324 SE 33RD PLACE  
City-St-Zip: OCALA, FL 34471

Title: D ( ) Delete  
Name: BELO, JULIAN R  
Address: 29 ALMOND TRAIL  
City-St-Zip: OCALA, FL 34483

Title: D ( ) Delete  
Name: REPIEDAD, AGLUNALDO L III  
Address: 2323 SE 33RD PLACE  
City-St-Zip: OCALA, FL 34471

Title: D ( ) Delete  
Name: DIAZ, EMMANUEL  
Address: 1624 29TH TERR  
City-St-Zip: OCALA, FL 34471

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: AGUINALDO REPIEDAD III

PRES

01/06/2006

Electronic Signature of Signing Officer or Director

Date