

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000001326

FILED  
Jun 15, 2009  
Secretary of State

**Entity Name:** FEDERATION OF IKUN-EKITI DESCENDANTS UNION OVERSEAS, INC.

**Current Principal Place of Business:**

2501 WALNUT HEIGHTS ROAD  
APOPKA, FL 32703

**New Principal Place of Business:**

**Current Mailing Address:**

2501 WALNUT HEIGHTS ROAD  
APOPKA, FL 32703

**New Mailing Address:**

**FEI Number:** 65-0823776      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
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:**

DADA, MICHAEL  
2501 WALNUT HEIGHTS ROAD  
APOPKA, FL 32703      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: OMOTUNDE, YEMI  
Address: 116 OAKRIDGE PL.  
City-St-Zip: PARK RIVER, ND 58270

Title: D ( ) Delete  
Name: AINA, KAYODE  
Address: 621 CACEATE WAY  
City-St-Zip: OXNARD, CA 93036

Title: D ( ) Delete  
Name: DADA, OLUSEGUN  
Address: 4241 58TH AVENUE, #8  
City-St-Zip: BLADENSBURG, MD 20710

Title: D ( ) Delete  
Name: ADELEYE, KAYODE  
Address: 5200 KEMPTON AVENUE  
City-St-Zip: OAKLAND, CA

Title: D ( ) Delete  
Name: ADELWUMI, JONATHAN  
Address: 325 FRANKLIN AVENUE  
City-St-Zip: BROOKLYN, NY 11238

Title: D ( ) Delete  
Name: AINA, JOHN  
Address: 401 MIRAMAR  
City-St-Zip: HOLLYWOOD, FL

**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: D (X) Change ( ) Addition  
Name: ADELEYE, KAYODE  
Address: 45574 W  
City-St-Zip: 45574 WHITCOMB SQ, VA 20166

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 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: ADELEYE, KAYODE

D

06/15/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date