

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000003344

FILED  
Mar 22, 2008  
Secretary of State

Entity Name: AMERICAN INDIAN CULTURAL SUPPORT, INC.

**Current Principal Place of Business:**

17908 PEPPER TREE LANE  
LUTZ, FL 33548

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1783  
LUTZ, FL 33548

**New Mailing Address:**

FEI Number: 59-3596556

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WICKS, RICHARD  
17908 PEPPER TREE LANE  
LUTZ, FL 33549 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: WICKS, RICHARD  
Address: 17908 PEPPER TEE LANE  
City-St-Zip: LUTZ, FL 33549

Title: D ( ) Delete  
Name: MORNING STAR, KATHY  
Address: 409 JOPPA FARM RD.  
City-St-Zip: JOPPA, MD 21085

Title: D ( ) Delete  
Name: SEMINOLE, BIAH YAZZIE  
Address: 736 HILLTOP NORTH  
City-St-Zip: VIRGINIA BEACH, VA 23451

Title: PL ( ) Delete  
Name: DAVIS, SKY  
Address: 132 STRONG ST  
City-St-Zip: EASTHAMPTON, MA 01027

**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:

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: RICHARD WICKS

D

03/22/2008

Electronic Signature of Signing Officer or Director

Date