2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2016
Secretary of State
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Entity Name: THE FLORIDA AFRICAN-AMERICAN STUDENT ASSOCIATION, INCORPORATED

Current Principal Place of Business:

2417 MARY JEWETT CIRCLE
WINTER HAVEN, FL 33881

Current Mailing Address:

2417 MARY JEWETT CIRCLE
WINTER HAVEN, FL 33881

FEI Number: 59-2086242

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BIRDSONG, ELIZABETH A
2417 MARY JEWETT CIR N E
WINTER HAVEN, FL 33881 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

Officer/Director Detail :

Title	PRESIDENT
Name	RUFFEN, KAILAH
Address	225 AVENUE P, NE
City-State-Zip:	WINTER HAVEN FL 33881

Title	SECRETARY
Name	HARRIS, DESTINIE
Address	2001 ALPINE ROAD APT. #9
City-State-Zip:	CLEARWATER FL 33755

Title	D
Name	PARKER, JAMES
Address	7430 SUNSHINE SKYWAY LANE, UNIT 805
City-State-Zip:	ST. PETERSBURG FL 33711

Title	VP OF FINANCE
Name	KING, DWAYNE
Address	1242 SOUTH C STREET LAKE WORTH
City-State-Zip:	LAKE WORTH FL 33460

Title	CD
Name	CLEVELAND, DONALD L
Address	3950 NW 75TH TERRACE
City-State-Zip:	LAUDERHILL FL 33319

Title	D
Name	HUNT, VERTRILLA K
Address	545 W. PALM VALLEY DRIVE
City-State-Zip:	OVIEDO FL 32765

I hereby 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 all other like empowered.

SIGNATURE: KAILAH RUFFEN PRESIDENT 04/27/2016

Electronic Signature of Signing Officer/Director Detail — Date