

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000004531

Entity Name: ANTHONY "DR. V." VIEGBESIE FOUNDATION, INC. FOR ECONOMIC FREEDOM**Current Principal Place of Business:**989 AMES BARINEAU RD.
HAVANA, FL 32333**Current Mailing Address:**P.O. BOX 607
HAVANA, FL 32333**FEI Number: 80-0140584****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**VIEGBESIE, ANTHONY DR.
989 AMES BARINEAU RD.
HAVANA, FL 32333 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 D
Name YOUNG, MORRIS SHERIFF
Address 339 E. JEFFERSON ST.
City-State-Zip: QUINCY FL 32351

Title D
Name SOLDANI-LEMON, MELISA DR.
Address 8373 INNSBROOK DR.
City-State-Zip: TALLAHASSEE FL 32312

Title D
Name JAMES, REGINALD
Address P.O. BOX 817
City-State-Zip: QUINCY FL 32353

Title D
Name VANLANDINGHAM, CLAY
Address P.O. BOX 585
City-State-Zip: QUINCY FL 32353

Title DR.
Name VIEGBESIE, ANTHONY O
Address P.O. BOX 607
City-State-Zip: HAVANA FL 32333

Title DIRECTOR
Name THOMAS, SHELIA
Address 295 WILLIE BRADLEY DR.
City-State-Zip: QUINCY FL 32352

Title DIRECTOR
Name SMITH, EARNEST J.
Address 1327 COLORADO ST.
City-State-Zip: TALLAHASSEE FL 32304

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: ANTHONY VIEGBESIE**PRESIDENT/CEO****03/18/2016**

Electronic Signature of Signing Officer/Director Detail

Date