

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED

DOCUMENT# N20000008309

Jan 21, 2024

Entity Name: AZIRA MICHEAL YOUTH FOUNDATION CORP

**Secretary of State
2251917924CC**

Current Principal Place of Business:

15918 INNERARITY POINT ROAD
PENSACOLA, FL 32507

Current Mailing Address:

15918 INNERARITY POINT ROAD
PENSACOLA, FL 32507 UN

FEI Number: 85-2339969

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

AZIRA, MICHEAL
15918 INNERARITY POINT ROAD
PENSACOLA, FL 32507 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 P
Name AZIRA, MICHEAL
Address 15918 INNERARITY POINT ROAD
City-State-Zip: PENSACOLA FL 32507

Title SECRETARY
Name ALLEN, LINDSEY
Address 5732 NUGGET CT. NE
City-State-Zip: ALBUQUERQUE NM 87111

Title T
Name MAWANDA, MUSA
Address 318 TRISTA LANE, APT A
City-State-Zip: GLASGOW KY 42141

Title PROGRAM COORDINATOR
Name RWEGO, IVAN MR
Address KAWEMPE
City-State-Zip: KAMPALA 256

Title ASST. COORDINATOR
Name MAKOPA, DENNIS BIGALA MR.
Address MAKERERE KIVULU
City-State-Zip: KAMPALA KAMPALA CENTRAL 256

Title SOCIAL MEDIA COORDINATOR
Name GUTHRIE, RANDI BROOKE
Address P.O BOX 67062
City-State-Zip: ALBUQUERQUE NM 87193

Title DIRECTOR OF COMMUNICATIONS
Name NYEMB, JUNIOR
Address 921 PARK CENTER DR
308
City-State-Zip: MATHEWS NC 28105

Title ASSISTANT PROJECT MANAGER/
UGANDA
Name WALUSIMBI, GODFREY
Address NSANGI- WAKISO DISTRICT
City-State-Zip: NSANGI UGANDA 256

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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: MICHEAL AZIRA

PRESIDENT

01/21/2024

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title ASSISTANT MEDIA COORDINATOR
Name ABBIE, JONES
Address 2103 LEVEE ROAD
City-State-Zip: CORINTH MS 38834

Title LIBRARIAN
Name ASHABA, JOAN MISS
Address P.O BOX 104812
City-State-Zip: BUKOMERO UGANDA 256

Title VOLUNTEER
Name WURUBE, ROBERT
Address P.O BOX 104812
City-State-Zip: BUKOMERO UGANDA 256

Title DIRECTOR OF OPERATIONS
Name KIZZA , DIANA
Address P.O BOX 104812
City-State-Zip: KAMPALA UGANDA 256

Title VOLUNTEER
Name NANJALA , PRISCILLA
Address P.O BOX 104812
City-State-Zip: BUKOMERO UGANDA 256