

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N21000005019

Entity Name: DESIGNING A HEALTHIER FUTURE FOR THE AFRICAN CHILD, INC.**FILED**
Apr 23, 2023
Secretary of State
6926263733CC**Current Principal Place of Business:**345 HAMMOCK OAK CIRCLE
DEBARY, FL 32713**Current Mailing Address:**345 HAMMOCK OAK CIRCLE
DEBARY, FL 32713 UN**FEI Number: 86-3270742****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**MULANDI, VICTORIA M
345 HAMMOCK OAK CIRCLE
DEBARY, FL 32713 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	PDT
Name	MULANDI, VICTORIA M
Address	345 HAMMOCK OAK CIRCLE
City-State-Zip:	DEBARY FL 32713
Title	DS
Name	AMWAYI, BRENDA K
Address	4300 W LAKE MARY BLVD STE 1010
City-State-Zip:	LAKE MARY FL 32746
Title	D
Name	MULANDI, VICTORIA
Address	345 HAMMOCK OAK CIRCLE
City-State-Zip:	DEBARY FL 32713

Title	D
Name	RUPERT, VALBUENA
Address	378 NORTHLAKE BLVD #256
City-State-Zip:	NORTH PALM BEACH FL 33408
Title	D
Name	CADET, ROCKINSKY
Address	3952 SILVERSTREAM TERRACE
City-State-Zip:	SANFORD FL 32771
Title	VP,D
Name	ASHIROV, AZIZ
Address	395 PORTER LAKE DR APT. 201
City-State-Zip:	LONGMEADOW MA 01106

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: VICTORIA MULANDI**04/23/2023**

Electronic Signature of Signing Officer/Director Detail

Date