## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

### DOCUMENT# N03000006749

Apr 30, 2007 Secretary of State

Entity Name: HISPANIC HERITAGE SCHOLARSHIP FUND OF METRO ORLANDO, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

315 E ROBINSON ST, STE 190 ORLANDO, FL 32801

**Current Mailing Address: New Mailing Address:** 

315 E ROBINSON ST, STE 190 ORLANDO, FL 32801

FEI Number: 01-0807279 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

FARNER, CECILIA 1409 SUNNINGDALE WAY ORLANDO, FL 32828

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:

Date

#### Electronic Signature of Registered Agent

# ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

#### **OFFICERS AND DIRECTORS:**

(X) Change ( ) Addition () Delete VALARINO, LIZETTE AILEEN, CUBILLOS Name:

Name: 201 S. ROSALIND AVE, 5TH FLOOR Address: 2400 BEDFORD RD. 2ND FLOOR Address:

ORLANDO, FL 32801 City-St-Zip: City-St-Zip: ORLANDO, FL 32803

(X) Change ( ) Addition Title: ( ) Delete Title:

OJEDA, RAMON Name: MARTINEZ, BETTY Name: Address: 315 E. ROBINSON ST., STE 190 Address: 315 E. ROBINSON ST. #190 City-St-Zip: ORLANDO, FL 32801 City-St-Zip: ORLANDO, FL 32801

Title: () Delete Title: () Change () Addition

FARNER, CECILIA Name: Name: 1409 SUNNIGDALE WAY Address: Address: City-St-Zip: ORLANDO, FL 32828 City-St-Zip:

Title: ( ) Delete Title: ED (X) Change ( ) Addition

VALARINO, LIZETTE Name: CUBILLOS, AILEE Name: 2400 BEDFORD RD. 2ND FLOOR Address: Address: 201 S. ROSALIND AVE. City-St-Zip: ORLANDO, FL 32803 City-St-Zip: ORLANDO, FL 32801

Title: () Delete Title: (X) Change ( ) Addition

HERNANDEZ, RICK GUTIERREZ, STEPHANIE Name: Name: 534 SEMORAN BLVD. 5900 LAKE ELLENOR DR. Address: Address: City-St-Zip: ORLANDO, FL 32807 City-St-Zip: ORLANDO, FL 32809

Title: () Delete Title: ( ) Change (X) Addition PALACIOS, KIRSTEN

Name: Name: Address: Address: 7401 CYPRESS GARDENS BLVD. WINTER HAVEN, FL 33888 City-St-Zip: 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: CECILIA FARNER Т 04/30/2007