2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000006749

FILED Jul 09, 2009 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 190 315 E ROBINSON ST. STE 465 ORLANDO, FL 32801 ORLANDO, FL 32801 **Current Mailing Address: New Mailing Address:** 315 E ROBINSON ST, STE 190 315 E ROBINSON ST, STE 465 ORLANDO, FL 32801 ORLANDO, FL 32801 FEI Number: 01-0807279 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ALFONSO, ELSIE 7 WHITE MARSH CIR ORLANDO, FL 32824 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete MARTINEZ, BETTY MARTINEZ, BETTY Name: Name: 315 E. ROBINSON ST. #190 Address: P O BOX 10000 Address: City-St-Zip: ORLANDO, FL 32801 City-St-Zip: LAKE BUENA VISTA, FL 32820 Title: () Delete Title: () Change () Addition ALFONSO, ELSIE Name: Name: Address: 7 WHITE MARSH CIR Address: City-St-Zip: ORLANDO, FL 32824 City-St-Zip: Title: () Delete Title: () Change () Addition VALARINO, LIZETTE Name: Name: 201 S. ROSALIND AVE. Address: Address: City-St-Zip: ORLANDO, FL 32801 City-St-Zip: (X) Change () Addition Title: () Delete Title: Name: QUIROZ, LORENA Name: ZUNIGA, JESSICA 315 E ROBIINSON ST STE190 2406 ROLLING BROAK DRIVE Address: Address: City-St-Zip: ORLANDO, FL 32803 City-St-Zip: ORLANDO, FL 32837 Title: VC VC () Delete Title: (X) Change () Addition PALACIOS, KIRSTEN PINERO, JAIME Name: Name: 555 LAKE BORDER DRIVE 7401 CYPRESS GARDENS BLVD. Address: Address: City-St-Zip: WINTER HAVEN, FL 33888 City-St-Zip: APOPKA, FL 32703

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: ELSIE ALFONSO T 07/09/2009