

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000003426

FILED  
May 04, 2011  
Secretary of State

**Entity Name:** HERNANDO COUNTY USBC, B.A., INC.

**Current Principal Place of Business:**

9297 ELIDA ROAD  
SPRING HILL, FL 34608

**New Principal Place of Business:**

**Current Mailing Address:**

9297 ELIDA ROAD  
SPRING HILL, FL 34608

**New Mailing Address:**

**FEI Number:** 75-3184025

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BOWERS, DUANE M  
9297 ELIDA ROAD  
SPRING HILL, FL 34608 US

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

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:**

Title: P  
Name: MAHR, ROBERT  
Address: 8262 STEWARD ST  
City-St-Zip: SPRING HILL, FL 34606

Title: D  
Name: BOWERS, DUANE M  
Address: 9297 ELIDA ROAD  
City-St-Zip: SPRING HILL, FL 34608

Title: VP  
Name: HATTON, CURTIS C  
Address: 24404 EVALINE ST.  
City-St-Zip: BROOKSVILLE, FL 34601

Title: D  
Name: ULM, STEPHEN  
Address: 318 WOODSTREAM WAY  
City-St-Zip: SPRING HILL, FL 34608

Title: VP  
Name: GUADAGNINO, GUS  
Address: 1539 FAYETTEVILLE DR,  
City-St-Zip: SPRING HILL, FL 34609

Title: D  
Name: KASTNER, RICHARD JR  
Address: 4203 SWEETBAY CT.  
City-St-Zip: WEEKI WACHEE, FL 34607

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: DUANE M BOWERS

D

05/04/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date