

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000007819

FILED
Mar 28, 2009
Secretary of State

Entity Name: NATURE COAST HUMAN RESOURCES SOCIETY, INC.

Current Principal Place of Business:

10481 SHEFFIELD ROAD
SPRING HILL, FL 34608

New Principal Place of Business:

23363 JACOBSON ROAD
BROOKSVILLE, FL 34601

Current Mailing Address:

PO BOX 6787
SPRING HILL, FL 34611

New Mailing Address:

FEI Number: 20-2647475 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOOPER, CARLA
23363 JACOBSON RD
BROOKSVILLE, FL 34601 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 () Delete
Name: BALDWIN, PAMELA
Address: 10481 SHEFFIELD RD
City-St-Zip: SPRING HILL, FL 34608

Title: V () Delete
Name: LOOPER, CARLA
Address: 23363 JACOBSON ROAD
City-St-Zip: BROOKSVILLE, FL 34601

Title: S () Delete
Name: CAMPBELL, JILL
Address: 1398 EXOTIC AVENUE
City-St-Zip: SPRING HILL, FL 34609

Title: T () Delete
Name: BUDAY, CINDY
Address: 966 CANDLELIGHT BLVD
City-St-Zip: BROOKSVILLE, FL 34601

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LOOPER, CARLA
Address: 23363 JACOBSON ROAD
City-St-Zip: BROOKSVILLE, FL 34601

Title: V (X) Change () Addition
Name: REY, JENNIFER
Address: 20 S BROAD ST
City-St-Zip: BROOKSVILLE, FL 34601

Title: S (X) Change () Addition
Name: CARLSON, DONNA
Address: 6125 NANTUCKET LANE
City-St-Zip: SPRING HILL, FL 34608

Title: T (X) Change () Addition
Name: HOWLEY, BETH
Address: 20 N MAIN ST
City-St-Zip: BROOKSVILLE, FL 34601

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: CARLA LOOPER

P

03/28/2009

Electronic Signature of Signing Officer or Director

Date