

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000011269

FILED
Jul 12, 2007
Secretary of State

Entity Name: BICOL ASSOCIATION OF SOUTHERN FLORIDA, INC.

Current Principal Place of Business:

25400 U.S. HIGHWAY 19 NORTH, STE 192
CLEARWATER, FL 33763

New Principal Place of Business:

Current Mailing Address:

25400 U.S. HIGHWAY 19 NORTH, STE 192
CLEARWATER, FL 33763

New Mailing Address:

FEI Number: 59-3215290 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
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:

BONA, III, RAFAEL B
25400 U.S. HIGHWAY 19 NORTH, STE 192
CLEARWATER, FL 33763 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: BONA, FAFAEL
Address: 25400 U.S. HIGHWAY 19 NORTH, STE 192
City-St-Zip: CLEARWATER, FL 33763

Title: V () Delete
Name: LOQUIAS, JESUS V
Address: 25400 U.S. HIGHWAY 19 NORTH, STE 192
City-St-Zip: CLEARWATER, FL 33763

Title: S () Delete
Name: RIVERA, NILDA F
Address: 25400 U.S. HIGHWAY 19 NORTH, STE 192
City-St-Zip: CLEARWATER, FL 33763

Title: T () Delete
Name: RIVERA, ROBERTO B M.D.
Address: 25400 U.S. HIGHWAY 19 NORTH, STE 192
City-St-Zip: CLEARWATER, FL 33763

Title: D () Delete
Name: PILONEO, HELEN P
Address: 25400 U.S. HIGHWAY 19 NORTH, STE 192
City-St-Zip: CLEARWATER, FL 33763

Title: D () Delete
Name: MEJIA-MISKI, NENA M.D.
Address: 25400 U.S. HIGHWAY 19 NORTH, STE 192
City-St-Zip: CLEARWATER, FL 33763

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BONA, FAFAEL
Address: 25400 U.S. HIGHWAY 19 NORTH, STE 192
City-St-Zip: CLEARWATER, FL 33763 US

Title: V (X) Change () Addition
Name: LOQUIAS, JESUS V
Address: 2747 BLUE SLATE COURT
City-St-Zip: LAND O'LAKES, FL 34638 US

Title: S (X) Change () Addition
Name: RIVERA, NILDA F
Address: 2448 NURSERY ROAD
City-St-Zip: CLEARWATER, FL 33764 US

Title: T (X) Change () Addition
Name: RIVERA, ROBERTO B M.D.
Address: 2448 NURSERY ROAD
City-St-Zip: CLEARWATER, FL 33764

Title: D (X) Change () Addition
Name: PILONEO, HELEN P
Address: 8866 MERRIMOOR BLVD
City-St-Zip: SEMINOLE, FL 33777 US

Title: D (X) Change () Addition
Name: MEJIA-MISKI, NENA M.D.
Address: 4604 WHISPERING PARK LANE
City-St-Zip: TAMPA, FL 336141480 US

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: NILDA F RIVERA

S

07/12/2007

Electronic Signature of Signing Officer or Director

_____ Date