

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N25149

FILED
Apr 14, 2004
Secretary of State**Entity Name:** HILLSBOROUGH EDUCATION FOUNDATION, INC.**Current Principal Place of Business:**2010 E. HILLSBOROUGH AVE
SUITE 212
TAMPA, FL 33610**New Principal Place of Business:****Current Mailing Address:**2010 E. HILLSBOROUGH AVE
SUITE 212
TAMPA, FL 33610**New Mailing Address:****FEI Number:** 59-2883361 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()****Name and Address of Current Registered Agent:**SUTTON, KEVIN H
101 EAST KENNEDY BOULEVARD
SUITE 3700
TAMPA, FL 33602 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:** DST () Delete
Name: DINGLE, PHILLIP S
Address: 3501 E. FRONTAGE RD
City-St-Zip: TAMPA, FL 33607**Title:** DP () Delete
Name: HOFFMAN, WILLIAM
Address: 2010 E. HILLSBOROUGH AVE #212
City-St-Zip: TAMPA, FL 33610**Title:** DVC () Delete
Name: GORDON, GILLETTE
Address: 702 N. FRANKLIN ST.
City-St-Zip: TAMPA, FL 33602**Title:** DC () Delete
Name: FLEISCHMAN, SOL JR
Address: 324 S. HYDE PARK AVE.
City-St-Zip: TAMPA, FL 33606**Title:** () Delete
Name:
Address:
City-St-Zip:**Title:** () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** DST (X) Change () Addition
Name: MAJOR, JIM
Address: 7305 PELICAN ISLAND DRIVE
City-St-Zip: TAMPA, FL 33634 US**Title:** DP (X) Change () Addition
Name: HOFFMAN, WILLIAM E
Address: 2010 E. HILLSBOROUGH AVE #212
City-St-Zip: TAMPA, FL 33610**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** T () Change (X) Addition
Name: SEEGER, GEORGE E
Address: 16724 VALSECA DE AVILA
City-St-Zip: TAMPA, FL 33613**Title:** S () Change (X) Addition
Name: ROTHENBERG, MARY SUE
Address: 1817 BAYSHORE BLVD
City-St-Zip: TAMPA, FL 33606

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: WILLIAM E. HOFFMAN

DP

04/14/2004

Electronic Signature of Signing Officer or Director

Date