2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000004700

FILED Jan 31, 2006 Secretary of State

Entity Name: THE HILLSBOROUGH CONSORTIUM FOR TECHNOLOGY AND EDUCATION, INC.

Current Principal Place of Business: New Principal Place of Business: 2110 NORTH BOULEVARD TAMPA, FL 33603 **Current Mailing Address: New Mailing Address:** 2110 NORTH BOULEVARD TAMPA, FL 33602 FEI Number: 31-1579966 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WILSON, TERRY 5101 RIVER BLVD. US TAMPA, FL 33603 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: () Change () Addition () Delete GONZALEZ, MARY Name: Name: 10701 STALLGATE DRIVE Address: Address: City-St-Zip: TAMPA, FL 33624 City-St-Zip: Title: STD () Delete Title: () Change () Addition Name: WILSON, TERRY Name: Address: 5101 RIVER BLVD Address: City-St-Zip: TAMPA, FL 33603 City-St-Zip: Title: () Delete Title: () Change () Addition CLEMENTS, JEAN Name: Name: Address: 3134 W. COACHMAN AVENUE Address: City-St-Zip: TAMPA, FL 33611 City-St-Zip: Title: MD () Delete Title: () Change () Addition WILSON, ELIZABETH Name: Name: 5101 RIVER BLVD Address: Address: City-St-Zip: TAMPA, FL 33603 City-St-Zip: Title: Title: VD () Delete () Change () Addition LUIACONI, CYNTHIA Name: Name: 12009 WANDSWORTH DRIVE Address: Address: City-St-Zip: TAMPA, FL 33626 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: TERRY WILSON STD 01/31/2006