

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000100996

FILED  
Apr 12, 2006  
Secretary of State

Entity Name: NEW HORIZONS OF HILLSBOROUGH, INC.

**Current Principal Place of Business:**

111 MASON ST  
BRANDON, FL 33511

**New Principal Place of Business:**

805 N PARSONS AVE  
BRANDON, FL 33510

**Current Mailing Address:**

111 MASON ST  
BRANDON, FL 33511

**New Mailing Address:**

805 N PARSONS AVE  
BRANDON, FL 33510

FEI Number: 59-3623685

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

OTTEWELL, SIMON  
111 MASON ST  
BRANDON, FL 33511 US

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

OTTEWELL, SIMON  
805 N PARSONS AVE  
BRANDON, FL 33511 US

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

04/12/2006

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: OTTEWELL, MR SIMON  
Address: 119C CENTRAL DR  
City-St-Zip: BRANDON, FL 33510

Title: VP ( ) Delete  
Name: OTTEWELL, KAREN  
Address: 119C CENTRAL DR.  
City-St-Zip: BRANDON, FL 33510

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: OTTEWELL, MR SIMON  
Address: 805 N PARSONS AVE  
City-St-Zip: BRANDON, FL 33510

Title: VP (X) Change ( ) Addition  
Name: OTTEWELL, KAREN  
Address: 805 N PARSONS AVE  
City-St-Zip: BRANDON, FL 33510

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIMON D OTTEWELL

Electronic Signature of Signing Officer or Director

PRES

04/12/2006

Date