

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04000011571

**Entity Name:** HILLSBOROUGH COUNTY 4-H YOUTH FOUNDATION, INC.

**Current Principal Place of Business:**

5339 SOUTH COUNTY ROAD 579  
SEFFNER, FL 33584

**Current Mailing Address:**

5339 SOUTH COUNTY ROAD 579  
SEFFNER, FL 33584

**FEI Number:** 20-1466250

**Certificate of Status Desired:** No

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

BIRKIN, STANLEY J  
5339 SOUTH COUNTY ROAD  
SEFFNER, FL 33584 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

\_\_\_\_\_ Date

**Officer/Director Detail :**

Title PD  
Name TOMPKINS, BETTY JO  
Address 1706 SOUTH KINGS AVE  
City-State-Zip: BRANDON FL 33511

Title VD  
Name HUTCHESON, BRUCE  
Address 5569 PINE STREET  
City-State-Zip: SEFFNER FL 33584

Title TD  
Name H OLCOMB, GENE  
Address 905 GAMAT PL  
City-State-Zip: SEFFNER FL 33584

Title TD  
Name BIRKIN, STANLEY J  
Address 2007 CAPE BEND AVE  
City-State-Zip: TAMPA FL 33613

*I hereby 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 all other like empowered.*

**SIGNATURE:** STANLEY J BIRKIN

**TREASURER**

01/23/2013

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date