2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2012
Secretary of State

DOCUMENT# 711820

Entity Name: HILLSBOROUGH COUNTY CLASSROOM TEACHERS' ASSOCIATION, INC.

Current Principal Place of Business:

4505 N. ROME AVE.
TAMPA, FL 33603

New Principal Place of Business:

Current Mailing Address:

4505 N. ROME AVE.
TAMPA, FL 33603

New Mailing Address:

FEI Number: 59-1108715 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BAXTER-JENKINS, STEPHANIE S
4505 N. ROME AVE.
TAMPA, FL 33603 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
Name: CLEMENTS, JEAN
Address: 3134 W COACHMAN AVE
City-St-Zip: TAMPA, FL 33611

Title: ST
Name: COOK, FAYE
Address: 2808 WILDER PARK DRIVE
City-St-Zip: PLANT CITY, FL 33566

Title: D
Name: RAMSEY, TED
Address: 1708 DOVE FIELD PLACE
City-St-Zip: BRANDON, FL 33510

Title: D
Name: BALLANS, AIMEE
Address: 18804 HOLLY PINE TRAIL
City-St-Zip: LITHIA, FL 33547

Title: VP
Name: DUPREE, MARILYN
Address: 8301 N. RIVER HIGHLAND PLACE
City-St-Zip: TAMPA, FL 33617

Title: D
Name: MURPHY, AMY
Address: 2607 ORANGE TREE LOOP #101
City-St-Zip: TAMPA, FL 33618

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: JEAN CLEMENTS P 04/27/2012

Electronic Signature of Signing Officer or Director — Date