2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#720322

FILED Apr 26, 2007 Secretary of State

Entity Name: HILLSBOROUGH ASSOCIATION FOR RETARDED CITIZENS, INC.

Current Principal Place of Business: New Principal Place of Business: 2714 W. KRIBY ST. TAMPA, FL 33614 US **Current Mailing Address: New Mailing Address:** P.O. BOX 9537 TAMPA, FL 33674 US FEI Number: 59-0895908 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LILLISTON, RICHARD 9704 MONARCH DRIVE TAMPA, FL 33618 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: () Delete (X) Change () Addition PIRO. PAUL LUE, DERRICK A Name: Name: 2202 N WESTSHORE BLVD Address: 13313 KRAMERIA WAY Address: City-St-Zip: TAMPA, FL 33607 City-St-Zip: TAMPA, FL 33626 Title: Title: () Delete () Change () Addition LOGSDON, GLORIA Name: Name: Address: 1150 SHIPWATCH CIRCLE Address: City-St-Zip: TAMPA, FL 33602 City-St-Zip: Title: () Delete Title: () Change () Addition WERKSTELL, SCOTT Name: Name: 9234 SHENANDOAH RUN Address: Address: City-St-Zip: WESTLEY CHAPEL, FL 33544 City-St-Zip: () Delete (X) Change () Addition Title: VΡ Title: DYE, ANNE Name: Name: FALCON, JOSHUA 4706 WEST LEONA STREET Address: Address: 4230 W. MACDILL AVE, SUITE H City-St-Zip: TAMPA, FL 33629 City-St-Zip: TAMPA, FL 33609 Title: () Delete Title: () Change () Addition FRASSA, CONRAD Name: Name: 8001 LAGO VISTA Address: Address: City-St-Zip: TAMPA, FL 33614 City-St-Zip: Title: () Delete Title: (X) Change () Addition FALCON, JOSHUA BURNETTE, MARSHALL J Name: Name: Address: 4230 S MACDILL AVE Address: 27451 MISTFLOWER DRIVE TAMPA, FL 33609 WESLEY CHAPEL, FL 33543 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: FRANK PANNULLO CFO 04/26/2007