2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 24, 2009
Secretary of State

DOCUMENT# 730206

Entity Name: THE HILLSBOROUGH COMMUNITY COLLEGE FOUNDATION, INC.

Current Principal Place of Business:

39 COLUMBIA DRIVE
P.O.BOX 31127 (336313127)
TAMPA, FL 33606

New Principal Place of Business:

39 COLUMBIA DRIVE
TAMPA, FL 33606

Current Mailing Address:

39 COLUMBIA DRIVE
P.O.BOX 31127 (336313127)
TAMPA, FL 33606

New Mailing Address:

39 COLUMBIA DRIVE, #719
TAMPA, FL 33606

FEI Number: 59-1810717 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GARCIA, ADREINNE M DR
39 COLUMBIA DR.
TAMPA, FL 33606 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: CD ( ) Delete
Name: ELLWANGER, TOM
Address: 39 COLUMBIA DRIVE # 719
City-St-Zip: TAMPA, FL 33606

Title: SM ( ) Delete
Name: GARCIA, ADRIENNE M
Address: 39 COLUMBIA DR.
City-St-Zip: TAMPA, FL 33606

Title: TD ( ) Delete
Name: CASPER, SUSAN
Address: 905 S DAKOTA AVE #100
City-St-Zip: TAMPA, FL 33606

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: HORN, ALYSON MS.
Address: 39 COLUMBIA DRIVE # 719
City-St-Zip: TAMPA, FL 33606

Title: S (X) Change ( ) Addition
Name: GARCIA, ADRIENNE M DR.
Address: 39 COLUMBIA DR., #719
City-St-Zip: TAMPA, FL 33606

Title: TD (X) Change ( ) Addition
Name: CASPER, SUSAN MS.
Address: 39 COLUMBIA DR., #719
City-St-Zip: TAMPA, FL 33606

Title: D ( ) Change (X) Addition
Name: KOONTZ, STEPHEN M MR.
Address: 39 COLUMBIA DR., #719
City-St-Zip: TAMPA, FL 33606

Title: D ( ) Change (X) Addition
Name: LAFFERTY, BRETT MR.
Address: 39 COLUMBIA DR., #719
City-St-Zip: TAMPA, FL 33606

Title: D ( ) Change (X) Addition
Name: JURADO, ROD MR.
Address: 39 COLUMBIA DR., #719
City-St-Zip: TAMPA, FL 33606

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: ADRIENNE M. GARCIA S 03/24/2009

Electronic Signature of Signing Officer or Director — Date