

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 735497

FILED
Mar 08, 2008
Secretary of State

Entity Name: HIBISCUS WOODS, INC.

Current Principal Place of Business:

542 HIBISCUS WAY
ORLANDO, FL 32807

New Principal Place of Business:

Current Mailing Address:

542 HIBISCUS WAY
ORLANDO, FL 32807

New Mailing Address:

FEI Number: 59-1910924

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BETANCES, CHARISSE
534 HIBISCUS WAY
ORLANDO, FL 32809 US

Name and Address of New Registered Agent:

BETANCES, CHARISSE
542 HIBISCUS WAY
ORLANDO, FL 32809 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:

03/08/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: GONZALEZ, FERNANDO
Address: 537 HIBISCUS WAY
City-St-Zip: ORLANDO, FL 32807

Title: D () Delete
Name: DESPINU, CARMEN
Address: 519 HIBISCUS WAY
City-St-Zip: ORLANDO, FL 32807

Title: T () Delete
Name: BETANES, CHARISSE
Address: 542 HIBISCUS WAY
City-St-Zip: ORLANDO, FL 32807

Title: S () Delete
Name: CUEVAS, CARMEN R
Address: 521 HIBISCUS WAY
City-St-Zip: ORLANDO, FL 32807

Title: D () Delete
Name: KISLING, NANCY
Address: 517 HIBISCUS WAY
City-St-Zip: ORLANDO, FL 32807

Title: P () Delete
Name: MINGE, JOE
Address: 543 HIBISCUS WAY
City-St-Zip: ORLANDO, FL 32807

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: DESPIAU, CARMEN
Address: 519 HIBISCUS WAY
City-St-Zip: ORLANDO, FL 32807

Title: T (X) Change () Addition
Name: BETANCES, CHARISSE
Address: 542 HIBISCUS WAY
City-St-Zip: ORLANDO, FL 32807

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: P (X) Change () Addition
Name: MENIG, JOE
Address: 543 HIBISCUS WAY
City-St-Zip: ORLANDO, FL 32807

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: CHARISSE BETANCES

T

03/08/2008

Electronic Signature of Signing Officer or Director

Date