2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 735871

FILED Feb 03, 2004 Secretary of State

Entity Name: HERNANDO ENVIRONMENTAL LAND PROTECTORS, INC.

Current Principal Place of Business: New Principal Place of Business:

7442 SHOAL LINE BLVD C/O AREA CLUB

WEEKI WACHEE, FL 34607 US

Current Mailing Address: New Mailing Address:

6200 BEAR TRAIL 6072 WAVERLY DR

C/O M.J. CLARK, TREASURER

C/O PATRICIA WEBB, TREASURER

WEEKI WACHEE, FL 34607 US

WEEKI WACHEE, FL 34607 US

FEI Number: 59-3045681 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

CLARK, M.J WEBB, PATRICIA 6200 BEAR TRAIL 6072 WAVERLY RD

WEEKI WACHEE, FL 346071607 US WEEKI WACHEE, FL 34607 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: PATRICIA WEBB 02/03/2004

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

tle: PD () Delete Title: PD (X) Change () Addition

Name: MORRON, CHÁRLES Name: FISH, DONALD Address: 6991 E. RICHARD DR. Address: 6136 WAVERLY RD.

City-St-Zip: WEEKI WACHEE, FL 346071607 City-St-Zip: WEEKI WACHEE, FL 34607

Title: VD () Delete Title: VD (X) Change () Addition Name: FISH, DONALD Name: WEBB JR., ELWOOD

 Address:
 6136 WAVERLY ROAD
 Address:
 6072 WAVERLY RD

 City-St-Zip:
 WEEKI WACHEE, FL 34607
 City-St-Zip:
 WEEKI WACHEE, FL 34607

Title: SD () Delete Title: SD (X) Change () Addition Name: MORTON, PAULA Name: SHANKS, DOLORES

Address: 6991 E. RICHARD DRIVE Address: 5369 TUSCAWILLA
City-St-Zip: WEEKI WATCHEE, FL 34607 City-St-Zip: WEEKI WACHEE, FL 34607

 Name:
 CLARK, M.J.
 Name:
 WEBB, PATRICIA

 Address:
 6200 BEAR TRAIL
 Address:
 6072 WAVERLY RD.

 City-St-Zip:
 WEEKI WATCHEE, FL 34607
 City-St-Zip:
 WEEKI WACHEE, FL 34607

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: DONALD FISH PD 02/03/2004