## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 739459**

FILED Apr 19, 2007 Secretary of State

Entity Name: FILIPINO-AMERICAN CLUB OF PINELLAS COUNTY, INC.

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
	D AVE. NORTH ATER, FL 33762 US			
Current Mailing Address:		New Mailing Addres	New Mailing Address:	
P.O. BOX 2 PINELLAS	261 PARK, FL 33780 US			
FEI Number:	59-1764381 FEI Number Applied For ( ) FE	El Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	Address of Current Registered Agent:	Name and Address	of New Registered Agent:	
	ANNA DAVE. NORTH ATER, FL 33762 US			
	named entity submits this statement for the purpo e of Florida.	se of changing its registere	d office or registered agent, or both,	
SIGNATUF	RE:			
	Electronic Signature of Registered Agent		Date	
OFFICERS AND DIRECTORS:		ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () Delete SANTOS, ANNA 3768 103 AVE N CLEARWATER, FL 33762	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	V () Delete ASUNCION, ALMA 8249 44 ST N PINELLAS PARK, FL 33780	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SEC () Delete QUEZON, ROSALINDA 4324 69TH AVE. NORTH PINELLAS PARK, FL 33781	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	TREA ( ) Delete UMALI, AMOR 7005 54TH AVE. N SAINT PETERSBURG, FL 33709	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	AUDI ( ) Delete SORIANO, CESAR 1741 GLENLAKES BLVD. N. SAINT PETERSBURG, FL 33716	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () Delete CAUNIN, MYRNA 1515 PINELLAS BAYWAY D39 TIERRA VERDE, FL 33715	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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: ANNA SANTOS PRES 04/19/2007