2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED May 24, 2007 8:00 am Secretary of State

DOCUMENT # 757380 1. Entity Name PRINCE HALL AFFILIATED BODIES OF HILLSBOROUGH COUNTY, INC.			1	05	5-24-2007 9000	04 030 ****61.2	25
Principal Place 1708 E. COL TAMPA, FL 3	UMBUS DRIVE	Malling Address 1708 E. COLUMBUS DRI TAMPA, FL 33605 U			- :		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.		05112007 _{CI}	ng-NP CF	R2E037 (12/06)	
City & State		City & State		4. FEI Number 59-215337	'8	Not	olied For Applicable
Zip	Country	Zip	Country	5. Certificate of St	atus Desired	\$8.75 Addit Fee Required	
	6. Name and Address of Current R	egistered Agent	NI	7. Name and Add	ress of New Regist	tered Agent	
HAUGABOOK, EARL 1708 E. COLUMBUS DRIVE			Name Street Addre	ess (P.O. Box Number is	Not Acceptable)		
TAMPA, FI	L 33605		1483	so Cor 1	708 E.	Columbus	Dn-
			City	24.00		FL Zip Code	115
the obligati	names entity submits this statement for tions of registered agent.	the purpose of changing its re	egistered office or reg	gistered agent, or both, in	the State of Florida.	. I am familiar with, a	and accept
SIGNATURE.	Signature, typed of printed name of registered agent an	d title il applicable. (NOTE:	Registered Agent signature re	A. C///E	3/ 6	DATE	
y	Signature typed of printed name of registered agent an Filling Fee is \$61.25 ue by September 14, 2007	d stile if applicable. (NOTE: 9. Election Camp Trust Fund Co	paign Financing	\$5.00 May Be Added to Fees	Make	Check payable to Department of Sta	
y	Filing Fee is \$61.25	9. Election Camp Trust Fund Co	paign Financing	\$5.00 May Be	Make Florida I	check payable to Department of Sta	ate
, Di	Filing Fee is \$61.25 ue by September 14, 2007	9. Election Camp Trust Fund Co	paign Financing ontribution.	\$5.00 May Be Added to Fees	Make Florida I	check payable to Department of Ste ND DIRECTORS IN Change	ate
10. TITLE NAME STREET ADDRESS	Filing Fee is \$61.25 ue by September 14, 2007 OFFICERS AND DIRE P GILES, JOHN L 14830 CORAL BERRY DR	9. Election Camp Trust Fund Co	paign Financing ontribution. 11. IIILE NAME STREET ADDRESS	\$5.00 May Be Added to Fees ADDITIONS/CHANG	Make Florida I	check payable to Department of Sta ND DIRECTORS IN Change	10
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Filing Fee is \$61.25 ue by September 14, 2007 OFFICERS AND DIRE P GILES, JOHN L 14830 CORAL BERRY DR TAMPA, FL 33626 T WALLACE, GEORGE 1777 LAKEVIEW VILLAGE DRIVE	9. Election Camp Trust Fund Co	paign Financing ontribution. 11. IIILE NAME STREET ADDRESS CITY-ST-ZIP IIILE NAME STREET ADDRESS	\$5.00 May Be Added to Fees ADDITIONS/CHANG	Make Florida I ES TO OFFICERS A	check payable to Department of Sta ND DIRECTORS IN Change	ate 10 Addition
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TIO. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Filing Fee is \$61.25 ue by September 14, 2007 OFFICERS AND DIRE P GILES, JOHN L 14830 CORAL BERRY DR TAMPA, FL 33626 T WALLACE, GEORGE 1777 LAKEVIEW VILLAGE DRIVE BRANDON, FL 33510 S ATKINS, BARBARA 11416-PRUITT ROAD SEFFNER, FL D WILLIAMS, ALMATINE C P.O. BOX 11763	9. Election Camp Trust Fund Co	paign Financing partribution. 11. IIILE NAME STREET ADDRESS CITY-ST-ZIP IIILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME SIREET ADDRESS CITY-ST-ZIP TITLE NAME SIREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	\$5.00 May Be Added to Fees ADDITIONS/CHANG	Make Florida I ES TO OFFICERS A EVEL ECANOLY 6 FPN 3:	Check payable to Department of Sta IND DIRECTORS IN Change Change Change Change	10 Addition Addition

12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this period of supplemental report is true and apply rate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an appreciation of the corporation of the receiver of the corporation of the receiver or trustee empowered by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if the corporation of the receiver of the receiver or trustee empowered.

SIGNATURE: