

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 760556

**FILED**  
**Apr 24, 2012**  
**Secretary of State**

**Entity Name:** HERNANDO COUNTY 4-H CLUB FOUNDATION, INC.

**Current Principal Place of Business:**

1653 BLAISE DRIVE  
BROOKSVILLE, FL 346013031 US

**New Principal Place of Business:**

1653 BLAISE DRIVE  
BROOKSVILLE, FL 34601 US

**Current Mailing Address:**

1653 BLAISE DRIVE  
BROOKSVILLE, FL 346013031 US

**New Mailing Address:**

1653 BLAISE DRIVE  
BROOKSVILLE, FL 34601 US

**FEI Number:** 59-2160397

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MOORES, NANCY A  
1653 BLAISE DRIVE  
BROOKSVILLE, FL 346013031 US

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

MOORES, NANCY A  
1653 BLAISE DRIVE  
BROOKSVILLE, FL 34601 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: \_\_\_\_\_

Electronic Signature of Registered Agent

04/24/2012

Date

**OFFICERS AND DIRECTORS:**

Title: DT  
Name: SCHMIDT, TORINA  
Address: 9442 WEATHERLY RD  
City-St-Zip: BROOKSVILLE, FL 34601 US

Title: DP  
Name: ESTRADA, KIM  
Address: 514 EAST AVE.  
City-St-Zip: BROOKSVILLE, FL 34601 US

I hereby 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 all other like empowered.

SIGNATURE: KIM ESTRADA

DP

04/24/2012

Electronic Signature of Signing Officer or Director

Date