2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2008
Secretary of State

DOCUMENT# F05000001147

Entity Name: HISPANIC NATIONAL BAR FOUNDATION, INC.

Current Principal Place of Business:

1900 K STREET NW
SUITE 100
WASHINGTON, DC 20006

New Principal Place of Business:

Current Mailing Address:

1900 K STREET NW
SUITE 100
WASHINGTON, DC 20006

New Mailing Address:

FEI Number: 59-2681611 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GALLEGOS, MARK
9130 S. DADELAND BLVD., STE. 1902
MIAMI, FL 33156 US

Name and Address of New Registered Agent:

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 — Date

OFFICERS AND DIRECTORS:

Title: PRES ( ) Delete
Name: AGUILAR, LUIS ESQ
Address: 303 PEACHTREE STREET, NE SUITE 5300
City-St-Zip: ATLANTA, GA 30308

Title: VP ( ) Delete
Name: GALLEGOS, MARK S ESQ
Address: 9130 S. DADELAND BLVD., STE. 1902
City-St-Zip: MIAMI, FL 33156

Title: S ( ) Delete
Name: SILLYMAN, MICHAEL W ESQ
Address: 8601 SCOTTSDALE RD.
City-St-Zip: SCOTTSDALE, AZ 85253

Title: TREA ( ) Delete
Name: PREGO, MAYDA ESQ
Address: 808 BRICKELL KEY DRIVE, APT. 906
City-St-Zip: MIAMI, FL 33131

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: MAGDA HERRERA ED 04/29/2008

Electronic Signature of Signing Officer or Director — Date