

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000003326

FILED  
May 27, 2006  
Secretary of State

**Entity Name:** HERNANDO ATHLETIC ASSOCIATION, INC.

**Current Principal Place of Business:**

10133 HEATHCLIFF ST  
SPRING HILL, FL 34608

**New Principal Place of Business:**

**Current Mailing Address:**

10133 HEATHCLIFF ST  
SPRING HILL, FL 34608

**New Mailing Address:**

**FEI Number:** 59-3650722      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

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

MAHLA, KATHLEEN K  
10133 HEATHCLIFF ST  
SPRING HILL, FL 34608      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

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD      ( ) Delete  
Name: MAHLA, KATHLEEN K  
Address: 10133 HEATHCLIFF STREET  
City-St-Zip: SPRING HILL, FL 34608

Title: VPD      ( ) Delete  
Name: MCDONALD, KEVIN  
Address: 3321 MORVEN DRIVE  
City-St-Zip: SPRING HILL, FL 34609

Title: TD      ( ) Delete  
Name: FULKERSON, PATTY  
Address: 11154 PACO STREET  
City-St-Zip: SPRING HILL, FL 34609

**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:

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: KATHLEEN K. MAHLA

PD

05/27/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date