

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000005909

FILED
Apr 13, 2009
Secretary of State

Entity Name: THE TREASURE COAST HUMAN RESOURCE ASSOCIATION, INC.

Current Principal Place of Business:

815 COLORADO AVE
310
STUART, FL 34994

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2731
VERO BEACH, FL 32961

New Mailing Address:

FEI Number: 65-0410606

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WITHSTANDLEY, REBECCA L C
1701 GULFSTREAM AVE
721
FORT PIERCE, FL 34949 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: DT () Delete
Name: WITHSTANDLEY, REBECCA L C
Address: 1701 GULFSTREAM AVE #721
City-St-Zip: FORT PIERCE, FL 34949

Title: DVP () Delete
Name: PORCHE, DEBRA
Address: 342 TUNISON LANE
City-St-Zip: SEBASTIAN, FL 32958

Title: DPE () Delete
Name: USHER, BILL
Address: 2266 14TH AVE., STE. 200
City-St-Zip: FT. PIERCE, FL 32961

Title: DP (X) Delete
Name: ZERAN, JENNY
Address: P.O. BOX 690759
City-St-Zip: VERO BEACH, FL 32969

Title: DS () Delete
Name: COLLINGS, LAURIE
Address: 1814 COMMERCE AVE STE C
City-St-Zip: VERO BEACH, FL 32960

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: DP (X) Change () Addition
Name: USHER, BILL
Address: 2266 14TH AVE., STE. 200
City-St-Zip: FT. PIERCE, FL 32961

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: REBECCA L C WITHSTANDLEY

DT

04/13/2009

Electronic Signature of Signing Officer or Director

Date