

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000007005

FILED  
Mar 07, 2007  
Secretary of State

Entity Name: HILLSBOROUGH COUNTY S.A.L.T. COUNCIL, INC.

## Current Principal Place of Business:

PO BOX 868  
MANGO, FL 335500868 US

## New Principal Place of Business:

868 BOX PO  
MANGO, FL 335500868 US

## Current Mailing Address:

PO BOX 868  
MANGO, FL 335500868 US

## New Mailing Address:

FEI Number: 59-3693544      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MAIOLO, TOM TREASUR  
4914 W. KNOX STREET  
TAMPA, FL 33634 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: MRS. ( ) Delete  
Name: HOWARD, CHARLOTTE B PRESIDE  
Address: 1907 SHANNONWOOD CT  
City-St-Zip: BRANDON, FL 33510

Title: MR. ( ) Delete  
Name: GIANI, JOE V.P.  
Address: 8606 BOULDER CT  
City-St-Zip: TAMPA, FL 33635

Title: MS. ( ) Delete  
Name: BELO, PAM  
Address: 2224 N FALKENBURG RD  
City-St-Zip: TAMPA, FL 33619

Title: MS. ( ) Delete  
Name: FIORELLA, COVAIS SECRETA  
Address: 3910 SOUTH MANHATTAN AVE.  
City-St-Zip: TAMPA, FL 33611

Title: MR. (X) Delete  
Name: SULLIVAN, MARTY HISTORI  
Address: 234 TAHOE CIRCLE  
City-St-Zip: VALRICO, FL 33594

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: MR. (X) Change ( ) Addition  
Name: SULLIVAN, MARTY V.P.  
Address: 234 TAHOE CIRCLE  
City-St-Zip: VALRICO, FL 33594

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

Title: MS. (X) Change ( ) Addition  
Name: ERIC, JOHNSON SECRETA  
Address: 13176 N. DALE MABRY HWY #139  
City-St-Zip: TAMPA, FL 33618

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: TOM MAIOLO

TREA

03/07/2007

Electronic Signature of Signing Officer or Director

Date