

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Sep 02, 2003 8:00 am
Secretary of State

09-02-2003 90185 031 ****61.25

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DOCUMENT # N01000000825

1. Entity Name

THE FLORIDA ASSOCIATION OF HISPANIC SCHOOL ADMINISTRATORS, INC.



Principal Place of Business

6529 HIDDEN BEACH CIR.
ORLANDO FL 32819

Mailing Address

6529 HIDDEN BEACH CIR.
ORLANDO FL 32819

2. Principal Place of Business

Engelwood Elem

3. Mailing Address

900 Engel Dr

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Orlando FL

City & State

Zip

Country

32807

Orange

Zip

Country

4. FEI Number **59-3671730**

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

AGUIRRE, OSCAR L
900 ENGEL DR
ORLANDO FL 32807

7. Name and Address of New Registered Agent

Name *Dr. Sonia B. Warner*

Street Address (P.O. Box Number is Not Acceptable)

1221 Brick Rd.

City

Winter Garden

FL

Zip Code

34787

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Sonia B. Warner *Sonia B Warner*

8/26/03

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
After September 10, 2003, min will be \$236.25

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Delete
DT	DIAZ, ANNA D	6529 HIDDEN BEACH CIR.	ORLANDO FL 32819	<input checked="" type="checkbox"/>
DS	VEGA, MARGARITA	414 SEVILLE AVE.	ALTAMONTE-SPRINGS FL 32714	<input type="checkbox"/>
DP	AGUIRE, OSCAR	2645 CEDAR BUFF LN.	OCOOEE FL 34761	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
DA	SONIA B. WARNER	9215 Palos Verde Dr.	Orlando, FL 32825	<input type="checkbox"/>	<input checked="" type="checkbox"/>
DT	Rolando Rivera	1911 Chatham Moor DR	Orlando, FL 32835-6190	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Sonia B. Warner

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/26/03

DATE

407-877-5054

Daytime Phone #

CR2E037 (4/03)