

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N02000004537

**FILED**  
**Apr 30, 2004**  
**Secretary of State****Entity Name:** HISPANIC COMMUNITY SERVICES, CORP.**Current Principal Place of Business:**2905 W REYNOLDS ST  
PLANT CITY, FL 33563 US**New Principal Place of Business:**2903 W REYNOLDS ST  
PLANT CITY, FL 33563 US**Current Mailing Address:**2905 W REYNOLDS ST  
PLANT CITY, FL 33563 US**New Mailing Address:**2903 W REYNOLDS ST  
PLANT CITY, FL 33563 US**FEI Number:** 75-3065996**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**FELIX, HEIDI I  
2905 W REYNOLDS ST  
PLANT CITY, FL 33653 US**Name and Address of New Registered Agent:**FELIX, HEIDI I  
2903 W REYNOLDS ST  
PLANT CITY, FL 33653 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: HEIDI FELIX

04/30/2004

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: FELIX, HEIDI I  
Address: 2905 W REYNOLDS ST  
City-St-Zip: PLANT CITY, FL 33563 US

Title: D ( ) Delete  
Name: FELIX, YADIRA  
Address: 2905 W REYNOLDS ST  
City-St-Zip: PLANT CITY, FL 33563 US

Title: D ( ) Delete  
Name: TREJO, CLAUDIA F  
Address: 2905 W REYNOLDS ST  
City-St-Zip: PLANT CITY, FL 33563 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DP (X) Change ( ) Addition  
Name: FELIX, HEIDI I  
Address: 2903 W REYNOLDS ST  
City-St-Zip: PLANT CITY, FL 33563 US

Title: D (X) Change ( ) Addition  
Name: FELIX, YADIRA  
Address: 2903 W REYNOLDS ST  
City-St-Zip: PLANT CITY, FL 33563 US

Title: D (X) Change ( ) Addition  
Name: TREJO, CLAUDIA F  
Address: 2903 W REYNOLDS ST  
City-St-Zip: PLANT CITY, FL 33563 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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: HEIDI FELIX

DP

04/30/2004

Electronic Signature of Signing Officer or Director

Date