2003 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 30, 2003
Secretary of State

DOCUMENT# N02000004955

Entity Name: THE HISPANIC ORGANIZATION OF NORTH FLORIDA, INC.

Current Principal Place of Business:

9749 CUNNINGHAM ROAD
JACKSONVILLE, FL 32246

New Principal Place of Business:

Current Mailing Address:

9749 CUNNINGHAM ROAD
JACKSONVILLE, FL 32246

New Mailing Address:

PO BOX 19651
JACKSONVILLE, FL 32245

FEI Number: 59-3752581 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SEPULVEDA, LILLIAN
9749 CUNNINGHAM ROAD
JACKSONVILLE, FL 32246

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: CD ( ) Delete
Name: SEPLVEDA, LILLIAN
Address: 1309 WALNUT STREET
City-St-Zip: GREENCOVE SPRINGS, FL 32043

Title: D ( ) Delete
Name: FELIX, DANIEL
Address: 1364 SWOOPING EAGLE
City-St-Zip: JACKSONVILLE, FL 32225

Title: SD ( ) Delete
Name: FELIX, LORI
Address: 1364 SWOOPING EAGLE
City-St-Zip: JACKSONVILLE, FL 32225

Title: TD ( ) Delete
Name: CASTO, VIOLETA
Address: 1054 CALIENTE DRIVE
City-St-Zip: JACKSONVILLE, FL 32211

Title: D ( ) Delete
Name: CORDERO, MIKA
Address: 9749 CUNNINGHAM ROAD
City-St-Zip: JACKSONVILLE, FL 32246

Title: D ( ) Delete
Name: QUINTERO, MARTHA
Address: 9749 CUNNINGHAM ROAD
City-St-Zip: JACKSONVILLE, FL 32246

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: SEPLVEDA, LILLIAN
Address: 1309 WALNUT STREET
City-St-Zip: GREENCOVE SPRINGS, FL 32043

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

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

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

Title: VP (X) Change ( ) Addition
Name: CORDERO, MIKA
Address: 9749 CUNNINGHAM ROAD
City-St-Zip: JACKSONVILLE, FL 32246

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 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: LILLIAN SEPULVEDA P 07/30/2003

Electronic Signature of Signing Officer or Director — Date