
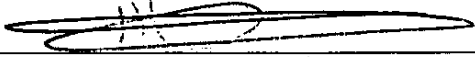
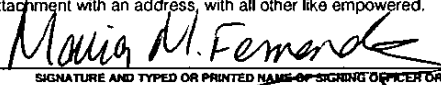


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 10, 2005 8:00 am
Secretary of State

02-10-2005 90062 029 ****70.00

DOCUMENT # N02000005282 1. Entity Name LATINO COMMUNITY COALITION OF FLORIDA, INC.					
Principal Place of Business POST OFFICE BOX 173094 TAMPA, FL 33672-1094			Mailing Address POST OFFICE BOX 173094 TAMPA, FL 33672-1094		
2. Principal Place of Business P.O. Box #173025		3. Mailing Address same			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State Tampa, Florida		City & State		4. FEI Number 05-0571029	
Zip 33672-1025		Country USA		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent QUINTANA, MICHAEL 7435 OAK VISTA CIRCLE TAMPA, FL 33634			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
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 Michael Quintana  2/8/05 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P QUINTANA, MICHAEL 7435 OAK VISTA CIRCLE TAMPA, FL 33634	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VT LOPEZ, MARIADO M 120 ARKWRIGHT DR E TAMPA, FL 33613	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S CHILS, MARIA 2706 W. LORRAINE AVENUE TAMPA, FL 33614	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete				
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete				
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete				
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete				
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete				
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete				
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:  Maria M. Fernandez 1/26/05 8131 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					

50013602



01262005 Chg-NP CR2E037 (10/03)

Applied For
Not Applicable

FL Zip Code

2/8/05

8131
908-9844

ATTACHMENT
#NO 2000005282
50073602

LATINO COMMUNITY COALITION OF FLORIDA, INC.

Articles of Incorporation

In compliance with Chapter 617, F.S. (Not for Profit)

Article I Name

The name of the corporation shall be:

Latino Community Coalition of Florida, Inc. (LCC)

Article II Principal Office

The Principal place of business and mailing address of this corporation shall be:

Post Office Box 173025, Tampa, Florida 33672-1025

Article III Purpose

The purpose for which the corporation is organized:

To improve the quality of life in the Latino Community in the State of Florida by creating and supporting a program which enhances the provision of public services such as affordable housing, housing counseling, employment, education, public health & safety and the protection of civil rights.

Article IV Manner of Election

The manner in which the directors are elected or appointed:

Directors shall be elected when necessary at the Annual Meeting of the membership by a majority vote of the voting members present. Nominations and qualifications submitted in writing to the corporate Secretary not less than five (5) days in advance of such Annual Meeting shall be prepared and made available to the members prior to the meeting.

Article V Initial Directors/Officers

The name(s), title(s) and address(es):

Michael Quintana, President, 7435 Oak Vista Circle, Tampa, FL 33634

Maria M. Fernandez, Vice-President/Treasurer, 120 Arkwright Drive, Tampa, FL 33613

Maria Chils, Secretary, 2706 W. Lorraine Avenue, Tampa, FL 33614

Article VI Initial registered agent and street address

The name and Florida street address of the registered agent is:

Michael Quintana, 7435 Oak Vista Circle, Tampa, FL 33634

Article VII Incorporator

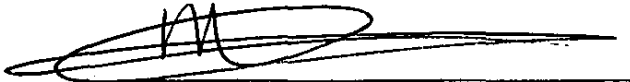
The name and address of the Incorporator is:

Maria M. Fernandez, 120 Arkwright Drive, Tampa, FL 33613

ATTACHMENT
#N0200005282

50013602

Having been named as registered agent to accept service of process for the above stated incorporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.



Signature/Registered Agent

Maria M. Fernandez

Signature/Incorporator

2/8/05

Date

1/26/05

Date