2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 12, 2004 8:00 am
Secretary of State
01-12-2004 90012 001 ****70.00

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1. Entity Name
HISPANIC-AMERICAN ASSOCIATION OF THE PANHANDLE, INC.

Principal Place of Business	Mailing Address
1025 W 19 ST 14C PANAMA CITY, FL 32405	8322 KLONDYKE ROAD YOUNGSTOWN, FL 32466

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc. P.O. Box 18506
City & State	City & State Panama City Beach, FL.
Zip / Country	Zip 32417-8506 / Country U.S.

01082004 Chg-NP CR2E037 (10/03)

4. FEI Number 01-0745161 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
SANDERS, ALMA 1025 W 19 ST 14C PANAMA CITY, FL 32405	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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2004

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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P SANCHEZ, IRIS 8322 KLONDYHE RD YOUNGSTOWN, FL 32466	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	[redacted] TD Velazquez-Padilla Ivan 231 S. Glades Trail Panama City Bch FL 32407	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD TUZINKEWIZ, ALFONSO 2204 W 24 ST PANAMA CITY, FL 32405	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D TUZINKEWIZ, ALFONSO 2204 W 24 ST Panama City, FL 32405	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD TAYLOR, ROSA 624 DRIFTWOOD DR LYNN HAVEN, FL 32444	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D TAYLOR, ROSA 624 Driftwood Dr. Lynn Haven, FL 32444	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	FD SANDERS, ALMA 1025 W 19 ST 14C PLANTATION, FL 32405	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S Lorond, Ana 3310 E. Game Farm Rd. Panama City FL. 32405	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

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: Ivan Velazquez-Padilla Ivan Velazquez-Padilla 1/8/04 (850)249-9043
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #