

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000008360

FILED
Mar 13, 2007
Secretary of State

Entity Name: HILLSBOROUGH COUNTY COALITION OF SMALL BUSINESS, INC.

Current Principal Place of Business:

1720 STARKEY ROAD
LARGO, FL 33771

New Principal Place of Business:

Current Mailing Address:

1720 STARKEY ROAD
LARGO, FL 33771

New Mailing Address:

FEI Number: 54-2087866

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCINTYRE, ROBERT D
1720 STARKEY ROAD
LARGO, FL 33771 US

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: DP () Delete
Name: MCINTYRE, ROBERT D
Address: 1720 STARKEY ROAD
City-St-Zip: LARGO, FL 33771

Title: DVP () Delete
Name: MCINTYRE, JOANNE F
Address: 1720 STARKEY ROAD
City-St-Zip: LARGO, FL 33771

Title: DT () Delete
Name: RAMIREZ, WENDY L
Address: 12110 75TH ST.
City-St-Zip: LARGO, FL 33773

Title: DS () Delete
Name: LOSTRAGLIO, MELISSA M
Address: 8337 WRENS WAY
City-St-Zip: LARGO, FL 33773

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: DT (X) Change () Addition
Name: RAMIREZ, WENDY L
Address: 9293 121ST ST
City-St-Zip: SEMINOLE, FL 33772

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 Chapter 119, 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: WENDY L RAMIREZ

T

03/13/2007

Electronic Signature of Signing Officer or Director

Date