


# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 27, 2006 8:00 am**  
**Secretary of State**

04-27-2006 90150 031 \*\*\*\*75.00

<b>DOCUMENT # N03000003886</b> 1. Entity Name <b>HATILLANOS SOCIAL CLUB, INC OF SPRINGHILL</b>					
Principal Place of Business <b>13185 SPRING HILL DRIVE SPRINGHILL FL 34609</b>				Mailing Address <b>5495 BARCLAY AVE SPRINGHILL FL 34609</b>	
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number <b>57-1165064</b> Applied For <input type="checkbox"/> Not Applicable <input checked="" type="checkbox"/>	
5. Certificate of Status Desired <input checked="" type="checkbox"/>				<b>\$8.75</b> Additional Fee Required	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
<b>COLON, HIPOLITO 5495 BARCLAY AVE. BROOKSVILLE FL 34609</b>				Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> 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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent Signature required when reappointing) DATE</small>					
<b>FILE NOW: FEE IS \$61.25</b> <b>Due By May 1, 2006</b>		9. Election Campaign Financing <input checked="" type="checkbox"/> <b>\$5.00</b> May Be Added to Fees		<b>Make Check Payable to</b> <b>Florida Department of State</b>	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD COLON, HIPOLITO 5495 BARCLAY AVE. BROOKSVILLE FL 34609	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT WILLIAM LOPEZ 13386 CANDIA ST SPRING HILL FL 34609	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD MANUEL SALAZAR, JUAN 6090 JOAN COURT SPRING HILL FL 34609	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VICE PRESIDENT EDELMIRO MENDEZ 1378 MATICO AVE SPRING HILL FL 34608	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S GONZALEZ, MARIA 1436 GOLD ROAD SPRING HILL FL 34609	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SECRETARY ISABEL ROGERS 12364 CORONADO DR SPRING HILL FL 34609	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD COLON, EMILIA 7005 SPRINGHILL DR. BROOKSVILLE FL 34606	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREASURER MARIA GONZALEZ 1436 Gold Rd SPRING HILL FL 34609	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	ASST SECRETARY IRMA LOPEZ 4283 BURNSIDE PKWY SPRING HILL FL 34606	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	ASST TREASURER EMILIA COLON 7005 SPRING HILL DR SPRING HILL FL 34609	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 19, 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: Hipolito Colon M. POLITO COLON 4/16/06