2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2006
Secretary of State

DOCUMENT# N03000009839

Entity Name: HERNANDO COUNTY COMMUNITY ANTI-DRUG COALITION CORP.

Current Principal Place of Business:

HERNANDO COUNTY SCHOOL BD ROOM
919 N. BROAD STREET
BROOKSVILLE, FL 34601

New Principal Place of Business:

Current Mailing Address:

6147 DELTONA BLVD.
SPRING HILL, FL 34606

New Mailing Address:

FEI Number: 20-0450051 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GORSKI, TERENCE T
6147 DELTONA BLVD
SPRING HILL, FL 34606 US

Name and Address of New Registered Agent:

WATSON, TRESA J
6147 DELTONA BLVD
SPRING HILL, FL 34606 US

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: TRESA J. WATSON 04/19/2006
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: T ( ) Delete
Name: FERGUSON-SMITH, JANICE
Address: 919 N. BROAD STREET
City-St-Zip: BROOKSVILLE, FL 34601

Title: C ( ) Delete
Name: GORSKI, TERENCE T
Address: 6147 DELTONA BLVD
City-St-Zip: SPRING HILL, FL 34606

Title: VC ( ) Delete
Name: LAVORE, SHALENE
Address: 919 N. BROAD STREET
City-St-Zip: BROOKSVILLE, FL 34601

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T (X) Change ( ) Addition
Name: WATSON, TRESA
Address: 6147 DELTONA BLVD
City-St-Zip: SPRING HILL, FL 34606

Title: PRES (X) Change ( ) Addition
Name: ELIZABETH, LORD
Address: 7074 GROVE ROAD
City-St-Zip: BROOKSVILLE, FL 34609

Title: VP (X) Change ( ) Addition
Name: WATSON, TRESA J
Address: 6147 DELTONA BLVD
City-St-Zip: BROOKSVILLE, FL 34609

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: TRESA WATSON VP 04/19/2006
Electronic Signature of Signing Officer or Director Date