

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000009839

FILED  
Jan 07, 2011  
Secretary of State

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

**Current Principal Place of Business:**

HERNANDO COUNTY SCHOOL BD ROOM  
6147 DELTONA BLVD  
SPRING HILL, FL 34606

**New Principal Place of Business:**

6193 DELTONA BLVD  
SPRING HILL, FL 34606

**Current Mailing Address:**

6147 DELTONA BLVD.  
SPRING HILL, FL 34606

**New Mailing Address:**

6193 DELTONA BLVD  
SPRING HILL, FL 34606

**FEI Number:** 20-0450051

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

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

**Name and Address of New Registered Agent:**

WATSON, TRESA J  
6193 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

01/07/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: SMITH, JANICE  
Address: 6193 DELTONA BLVD  
City-St-Zip: SPRING HILL, FL 34606

Title: V. P  
Name: SANDRA, MARRERO  
Address: 6193 DELTONA BLVD  
City-St-Zip: SPRING HILL, FL 34608

Title: ED  
Name: TRESA, WATSON J  
Address: 6193 DELTONA BLVD  
City-St-Zip: SPRING HILL, FL 34608

Title: TSR  
Name: LEWIS, RICHARD  
Address: 6193 DELTONA BLVD  
City-St-Zip: SPRING HILL, FL 34608

I hereby 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 all other like empowered.

SIGNATURE: TRESA J. WATSON

ED

01/07/2011

Electronic Signature of Signing Officer or Director

Date