

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000008983

FILED
Apr 28, 2006
Secretary of State

Entity Name: THE HISPANIC AMERICAN CULTURAL ALLIANCE OF NORTH FLORIDA, INC.

Current Principal Place of Business:

P.O. BOX 600235
JACKSONVILLE, FL 322600235 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 600235
JACKSONVILLE, FL 322600235 US

New Mailing Address:

FEI Number: 20-1635552

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VALDELAMAR, EDUARDO
P.O. BOX 600235
JACKSONVILLE, FL 322600235 US

Name and Address of New Registered Agent:

SALAZAR, JORGEW
P.O. BOX 600235
JACKSONVILLE, FL 322600235 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: JORGE SALAZAR

04/28/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: VALDELAMAR, EDUARDO
Address: P.O. BOX 8655
City-St-Zip: FLEMING ISLAND, FL 32006 US

Title: VD (X) Delete
Name: GUARNIZO, JHON FR
Address: 7190 HWY 17 SOUTH
City-St-Zip: GRENN COVE SPRINGS, FL 32043 US

Title: SD () Delete
Name: MEDINA PEREZ, MARIA
Address: 3517 W. AMANDA CT
City-St-Zip: JACKSONVILLE, FL 32259 US

Title: TD () Delete
Name: RODRIGUEZ, JULIO E
Address: 12443 SAN JOSE BLVD. #604
City-St-Zip: JACKSONVILLE, FL 32259

Title: D () Delete
Name: RAMIREZ, GILBERTO
Address: 11522 DELEGATE CT.
City-St-Zip: JACKSONVILLE, FL 32246

Title: D () Delete
Name: TOLENTINO, OCTAVIO
Address: 3558 POND RIDGE CT. W
City-St-Zip: JACKSONVILLE, FL 32223

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SALAZAR, JORGE
Address: P.O. BOX 600235
City-St-Zip: JACKSONVILLE, FL 32260 US

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

Title: () Change () Addition
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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: JULIO E. RODRIGUEZ

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04/28/2006

Electronic Signature of Signing Officer or Director

Date