

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000010190

FILED
Feb 14, 2007
Secretary of State

Entity Name: HERNANDO COUNTY PHILIPPINE-AMERICAN ASSOCIATION INCORPORATED

Current Principal Place of Business:

P.O. BOX 1543
BROOKSVILLE, FL 34605 US

New Principal Place of Business:

26423 SOULT ROAD
BROOKSVILLE, FL 34605 US

Current Mailing Address:

P.O. BOX 1543
BROOKSVILLE, FL 34605 US

New Mailing Address:

FEI Number: 20-3551085 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

SIGUA, GILBERT C DR.
10276 PALMGREN LANE
SPRING HILL, FL 34608 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: P () Delete
Name: RICE, AURORA MRS.
Address: 26423 SOULT ROAD
City-St-Zip: BROOKSVILLE, FL 34601

Title: VP () Delete
Name: ATIENZA, ARMANDO MR.
Address: 12174 KILLIAN ST
City-St-Zip: SPRING HILL, FL 34608 US

Title: S () Delete
Name: SIGUA, CELIA A MRS.
Address: 10276 PALMGREN LANE
City-St-Zip: SPRING HILL, FL 34608 US

Title: T () Delete
Name: TARACATAC, PAUL MR.
Address: 26423 SOULT ROAD
City-St-Zip: BROOKSVILLE, FL 34601

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: GILBERT C. SIGUA

D

02/14/2007

Electronic Signature of Signing Officer or Director

Date