## 2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# N05000012126

TI FILED
Dec 13, 2006
Secretary of State

Entity Name: SPANISH ASSOCIATION OF NORTH FLORIDA INC. **Current Principal Place of Business: New Principal Place of Business:** 12768 SERENADE CIRCLE SOUTH JACKSONVILLE, FL 32225 **Current Mailing Address: New Mailing Address:** 12768 SERENADE CIRCLE SOUTH JACKSONVILLE, FL 32225 FEI Number: 56-2579197 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BENTON, MARIA L 12768 SERENADE CIRCLE SOUTH JACKSONVILLE, FL 32225 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition BENTON, MARIA L Name: Name: 12768 SERENADE CIRCLE SOUTH Address: Address: City-St-Zip: JACKSONVILLE, FL 32225 City-St-Zip: Title: Title: (X) Change ( ) Addition ( ) Delete Name: STRELITZ, FRANCISCA Name: YOUNG, ANGELA Address: 165 HAWTHORNE RD Address: 12768 SERENADE CIRCLE SOUTH City-St-Zip: ST. AUGUSTINE, FL 32086 City-St-Zip: JACKSONVILLE, FL 32225 Title: () Delete Title: (X) Change ( ) Addition DOOLITTLE, MARIA G SANJUAN, JUAN J Name: Name: 252 OTTERWOOD COURT 2701 COLONIES DRIVE Address: Address: City-St-Zip: JACKSONVILLE, FL 32225 City-St-Zip: JACKSONVILLE BEACH, FL 32250 (X) Change ( ) Addition Title: () Delete Title: Name: BENTON, ANGELA M Name: SANJUAN, JUAN J 11815 ALDEN ROAD APT. 804 252 OTTERWOOD CT Address: Address: City-St-Zip: JACKSONVILLE, FL 32246 City-St-Zip: JACKSONVILLE, FL 32225 Title: () Delete Title: ( ) Change (X) Addition BONN, SONIA Name: Name: 1841 HEATPINE DRIVE Address: Address: City-St-Zip: City-St-Zip: MIDDLEBURG, FL 32068

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: MARIA L BENTON P 12/13/2006