

2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Sep 10, 2008
Secretary of State

DOCUMENT# N06000003668

Entity Name: ALIANZA HISPANA DE LA BAHIA DE TAMPA, INC.**Current Principal Place of Business:**16403 LAKE HEATHER DRIVE
TAMPA, FL 33618**New Principal Place of Business:**416 KINGS PATH DR
SEFFNER, FL 33584**Current Mailing Address:**16403 LAKE HEATHER DRIVE
TAMPA, FL 33618**New Mailing Address:**PO BOX 152132
TAMPA, FL 33684**FEI Number:** 11-3795640**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**SANCHEZ, GILBERTO E ESQ.
114 S. FREMONT AVE.
TAMPA, FL 33606 US**Name and Address of New Registered Agent:**LOPEZ, LUIS A
416 KINGS PATH DR
SEFFNER, FL 33584 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: LUIS A. LOPEZ

09/10/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: HALE, EVELYN P
Address: 410 NW 1ST AVE #505
City-St-Zip: FT. LAUDERDALE, FL 33301 US

Title: D () Delete
Name: LOPEZ, LUIS VP
Address: P.O. BOX 152642
City-St-Zip: TAMPA, FL 33684 US

Title: D () Delete
Name: VERA, GRETTA SEC
Address: 8104 N HALE AVE
City-St-Zip: TAMPA, FL 33614 US

Title: D () Delete
Name: OWENS, MARIA T TREAS
Address: 19307 GARDEN QUILT CR
City-St-Zip: LUTZ, FL 33558 US

Title: D (X) Delete
Name: PINTO, JUAN C AUDIT
Address: 1628 STETSON DR.
City-St-Zip: WESLEY CHAPEL, FL 33543 US

Title: D (X) Delete
Name: CARRILLO, MARIA E D
Address: 16403 LAKE HEATHER DR.
City-St-Zip: TAMPA, FL 33618 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: LOPEZ, LUIS PRES
Address: 416 KINGS PATH DR
City-St-Zip: SEFFNER, FL 33584 US

Title: D (X) Change () Addition
Name: HENNESSEY, ENCARNACION VP
Address: 6513 JOHN'S ROAD
City-St-Zip: TAMPA, FL 33634 US

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

Title: D (X) Change () Addition
Name: LEAL, CARLOS A TRES
Address: 4902 N MACDILL AVE.
City-St-Zip: TAMPA, FL 33614 US

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 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: LUIS LOPEZ

D

09/10/2008

Electronic Signature of Signing Officer or Director

Date