

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000011027

FILED  
Jan 06, 2010  
Secretary of State

**Entity Name:** THE HUMAN RIGHTS GROUP, INC.

**Current Principal Place of Business:**

309 JASMINE WAY  
CLEARWATER, FL 33756

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 413  
CLEARWATER, FL 33757

**New Mailing Address:**

**FEI Number:** 83-0499070

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DRAZKOWSKI, LINDA  
309 JASMINE WAY  
CLEARWATER, FL 33756 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  
Name: DRAZKOWSKI, LINDA  
Address: P.O. BOX 413  
City-St-Zip: CLEARWATER, FL 33757

Title: D  
Name: DRAZKOWSKI, MICHAEL  
Address: P.O. BOX 413  
City-St-Zip: CLEARWATER, FL 33757

Title: D  
Name: ANDERSON, MARLIN  
Address: P.O. BOX 413  
City-St-Zip: CLEARWATER, FL 33757

Title: D  
Name: SENE, YAMILA  
Address: 764 FORREST GLEN RD.  
City-St-Zip: CLEARWATER, FL 33765 US

Title: D  
Name: FERRERIA, SHERRI  
Address: P. O. BOX 413  
City-St-Zip: CLEARWATER, FL 33757 US

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: LINDA DRAZKOWSKI

PRES

01/06/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date