

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 11, 2005
Secretary of State

DOCUMENT# N19239

Entity Name: THE MOTHERS' CLUB OF HERNANDO COUNTY, INC.

Current Principal Place of Business:

MOTHER'S CLUB OF H.C.
SPRING HILL, FL 34609 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 3144
SPRING HILL, FL 34609 US

New Mailing Address:

FEI Number: 59-2799667 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ABAMO, JOANN
12227 FOOTHILL ST
SPRING HILL, FL 34609 US

Name and Address of New Registered Agent:

ABARNO, JOANN
12227 FOOTHILL ST
SPRING HILL, FL 34609 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: JO ANN ABARNO

04/11/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: TRAUDT, MICHELLE
Address: 13150 LINDEN DR
City-St-Zip: SPRING HILL, FL 34609

Title: V () Delete
Name: HATFIELD, SUSIE
Address: 16095 FT MYERS ST
City-St-Zip: SPRING HILL, FL 34604

Title: T () Delete
Name: ABARNO, JOANN
Address: 12227 FOOTHILL ST
City-St-Zip: SPRING HILL, FL 34609

Title: S () Delete
Name: PELORA, MICHELLE
Address: 8344 NATOMA ST
City-St-Zip: SPRING HILL, FL 34606

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S (X) Change () Addition
Name: TRAUDT, MICHELLE
Address: 13150 LINDEN DR
City-St-Zip: SPRING HILL, FL 34609

Title: V (X) Change () Addition
Name: GOUCHER*****, STACIE
Address: 11298 LONG HILL COURT
City-St-Zip: SPRING HILL, FL 34609

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

Title: P (X) Change () Addition
Name: PELORA, MICHELLE
Address: 8344 NATOMA ST
City-St-Zip: SPRING HILL, FL 34606

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JO ANN ABARNO

T

04/11/2005

Electronic Signature of Signing Officer or Director

Date