## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N23326

Entity Name: NAMI HILLSBOROUGH, INC.

FILED Jul 29, 2004 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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11405 ORILLA DEL RIO PLACE TEMPLE TERRACE, FL 33617 US

Current Mailing Address: New Mailing Address:

11405 ORILLA DEL RIO PLACE TEMPLE TERRACE, FL 33617 US

FEI Number: 59-2865768 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:

THOMAS, GEORGE

11405 ORILLA DEL RIO PLACE
TEMPLE TERRACE, FL 33617 US

THOMAS, GEORGE C PD
11405 ORILLA DEL RIO PLACE
TEMPLE TERRACE, FL 33617 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: GEORGE C THOMAS 07/29/2004

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP ( ) Delete Title: PD (X) Change ( ) Addition Name: THOMAS, GEORGE, Name: GEORGE, THOMAS C DP Address: 11405 ORILLA DEL RIO PLACE Address: TEMPLE TERRACE, FL 33617 US TEMPLE TERRACE, FL 33617 US

Title: VD ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 ROLDAN, FRANCISCA
 Name:

 Address:
 1916 LIVINGSTON AVE
 Address:

 City-St-Zip:
 LUTZ, FL 33549 US
 City-St-Zip:

Title: TD ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 DUCHNOWSKÍ, AL
 Name:

 Address:
 1143 WYNNHAM LAKE DRIVE
 Address:

 City-St-Zip:
 ODESSA, FL 33556 US
 City-St-Zip:

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: GEORGE C THOMAS PD 07/29/2004