2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N28714

FILED Jun 20, 2006 Secretary of State

Entity Name: HILLSBOROUGH RIVER STATE PARK PRESERVATION SOCIETY, INC.

| Current F | Principal Place of Business: | New Principal Place of Business: |
|--|---|--|
| | S HIGHWAY 301 NORTH OSASSA, FL 33592 | |
| Current N | Mailing Address: | New Mailing Address: |
| | NBROOK DRIVE HILLS, FL 33540 | |
| | r: 59-2920505 FEI Number Applied For (nce with s. 607.193(2)(b), F.S., the corporation | |
| Name and | d Address of Current Registered Agen | nt: Name and Address of New Registered Agent: |
| 11013 LYI ZEPHYRI | RTH, PHILLIP NBROOK DRIVE HILLS, FL 33540 US | |
| | e named entity submits this statement for te of Florida. | the purpose of changing its registered office or registered agent, or both, |
| n the Stat | te of Florida. | the purpose of changing its registered office or registered agent, or both, |
| | te of Florida. | |
| n the Stat SIGNATU | te of Florida. Î | |
| n the Stat SIGNATU | te of Florida. JRE: Electronic Signature of Registered RS AND DIRECTORS: PD () Delete SAUNDERS, STEVE 305 SUZETTE DRIVE | d Agent Date |
| n the Stat SIGNATU DFFICER Title: Jame: Address: | te of Florida. JRE: Electronic Signature of Registered RS AND DIRECTORS: PD () Delete SAUNDERS, STEVE 305 SUZETTE DRIVE BRANDON, FL 33511 TD () Delete HEPWORTH, PHILLIP 41013 LYNBROOK DRIVE | d Agent Date ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS Title: () Change () Addition Name: Address: |
| n the Stat BIGNATU DFFICER Title: Jame: Jame: Jame: Jame: Jame: Jame: Jame: Jame: Jame: | te of Florida. JRE: Electronic Signature of Registered RS AND DIRECTORS: PD () Delete SAUNDERS, STEVE 305 SUZETTE DRIVE BRANDON, FL 33511 TD () Delete HEPWORTH, PHILLIP 41013 LYNBROOK DRIVE ZEPHYRHILLS, FL 33540 SD () Delete WOODS-HEPWORTH, SARAH 41013 LYNBROOK DRIVE | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS Title: () Change () Addition Name: Address: City-St-Zip: Title: () Change () Addition Name: Address: |

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: HARLEY C. GILMORE VD 06/20/2006