

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 17, 2006 8:00 am**  
**Secretary of State**

02-17-2006 90073 034 \*\*\*\*61.25

**DOCUMENT # N29465**

1. Entity Name

HILLSBOROUGH REGION AACA, INC.



Principal Place of Business

5612 PADDOCK TRAIL DRIVE  
TAMPA FL 33621  
US

Mailing Address

5612 PADDOCK TRAIL DRIVE  
TAMPA FL 33624  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number

59-2953057

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

HALL, MARLENE  
714 APOLLO BEACH BLVD  
APOLLO BEACH FL 33572

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2006**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to**  
**Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE VP ☒ Delete  
NAME SMITH, HOWARD  
STREET ADDRESS 6619 KRYCIL AVE  
CITY-ST-ZIP RIVERVIEW FL 33569

TITLE P ☒ Delete  
NAME HALL, RICHARD  
STREET ADDRESS 714 APOLLO BEACH BLVD.  
CITY-ST-ZIP APOLLO BEACH FL 33572

TITLE S ☐ Delete  
NAME FERNANDEZ, LINDA  
STREET ADDRESS 7214 FLOWERFIELD DR  
CITY-ST-ZIP TAMPA FL 33615

TITLE T ☐ Delete  
NAME HALL, MARLENE  
STREET ADDRESS 714 APOLLO BCH BLVD  
CITY-ST-ZIP APOLLO BEACH FL 33572

TITLE D ☐ Delete  
NAME SUTER, CHARLES  
STREET ADDRESS 4209 W NEPTUNE ST  
CITY-ST-ZIP TAMPA FL 33629

TITLE D ☐ Delete  
NAME SMITH, WILLARD  
STREET ADDRESS 6302 OHIO ST  
CITY-ST-ZIP GIBSONTON FL 33534

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE VP KATHERINE KURASH ☐ Change ☒ Addition  
NAME KATHERINE KURASH  
STREET ADDRESS 60258 NEUMS RD. W.  
CITY-ST-ZIP LAKELAND, FL 33811

TITLE P ☐ Change ☒ Addition  
NAME WILLIE FERNANDEZ  
STREET ADDRESS 7214 FLOWERFIELD DR.  
CITY-ST-ZIP TAMPA, FL 33615

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS 39105 RIVER RD.  
CITY-ST-ZIP DADE CITY, FL 33525

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Marlene Hall* MARLENE HALL

2/17/2006 (813) 645-6985