## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N29796

FILED Jul 02, 2004 Secretary of State

Entity Name: HILLSBOROUGH ORGANIZATION FOR PROGRESS AND EQUALITY, INC.

Current Principal Place of Business:			New Principal Plac	New Principal Place of Business:	
	OULEVARD				
STE B FAMPA, F	L 33603 US	3			
Current M	rrent Mailing Address:		New Mailing Addre	New Mailing Address:	
	OULEVARD		_		
STE B FAMPA, F		6			
El Number	: 59-2914463	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	l Address of C	Current Registered Agent:	Name and Address	of New Registered Agent:	
EE, WILLIARD L 1021 N. 48TH ST. APT. "A" TAMPA, FL 33605 US		LEE, WILLIARD L 3021 N. 48TH ST. AI TAMPA, FL 33605	3021 N. 48TH ST. APT.		
	e named entity : e of Florida.	submits this statement for the	purpose of changing its register	red office or registered agent, or both,	
SIGNATURE:				07/02/2004	
	Electror	nic Signature of Registered Ag	ent	Date	
OFFICERS AND DIRECTORS:		ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR		
Fitle: Name: Address: City-St-Zip:	FSD ( ) KEMP, HILRIE 8005 ASH AVE TAMPA, FL	Delete JR	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: Dity-St-Zip:	VP ( ) JOHNSON, JOI 4405 PORPOIS TAMPA, FL		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Fitle: Name: Address: City-St-Zip:	CSD ( ) ROSS, ESTHE 1803 E 142ND TAMPA, FL 33	AVE#A	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Γitle: Name: Nddress:	ROGERS, LOR 4306 N 39TH S		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
City-St-Zip:		) Delete	Title:	( ) Change ( ) Addition	
	D ( ) STREATER, SH 810 W VIRGINI TAMPA, FL	HARON	Name: Address: City-St-Zip:	· , · · · · · · · · · · · · · · · · · ·	

rierepy 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: SHARON STREATER D 07/02/2004