2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N36626

FILED Jul 08, 2008 Secretary of State

Entity Name: THE EARLY CHILDHOOD COUNCIL OF HILLSBOROUGH COUNTY, INC.

Current Principal Place of Business: New Principal Place of Business:

4210 W. BAY VILLA AVENUE TAMPA, FL 33611 US

Current Mailing Address: New Mailing Address:

4210 W. BAY VILLA AVENUE TAMPA, FL 33611 US

FEI Number: 59-2998189 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MARINO, PAUL J., ESQ. FICCA, JOHN

ORANGE PARK CENTER, 696 1ST AVENUE 6803 E. CREEK DRIVE SUITE 304 TAMPA, FL 33615 US

ST PETERSBURG, FL 33701 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: JOHN FICCA 07/08/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: P () Delete Title: P (X) Change () Addition

Name: BUCY, MILDRED Name: GILYARD, SHELTON

Address: 4210 W BAY VILLA AVE Address: 13301

City-St-Zip: TAMPA, FL 33611 US City-St-Zip: TAMPA, FL 33612

Title: T () Delete Title: () Change () Addition

 Name:
 SLAGG, PAMELA
 Name:

 Address:
 4315 W. SAN PEDRO ST
 Address:

 City-St-Zip:
 TAMPA, FL 33629 US
 City-St-Zip:

 $\label{eq:title:V} {\sf Title:} \qquad {\sf V} \qquad {\sf ()} \ {\sf Delete} \qquad \qquad {\sf Title:} \qquad {\sf V} \qquad {\sf (X)} \ {\sf Change} \ {\sf ()} \ {\sf Addition}$

 Name:
 GILYARD, SHELTON
 Name:
 VANPELT, GREG

 Address:
 13301 BRUCE B. DOWNS BLVD.
 Address:
 2215 E. HENRY AVENUE

 City-St-Zip:
 TAMPA, FL 33612 US
 City-St-Zip:
 TAMPA, FL 33610 US

Title: S () Delete Title: () Change () Addition

 Name:
 CORNELIUS, MIKE
 Name:

 Address:
 2215 E. HENRY AVENUE
 Address:

 City-St-Zip:
 TAMPA, FL 33610 US
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: SHELTON GILYARD P 07/08/2008