

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N37015

FILED
Jul 02, 2007
Secretary of State

Entity Name: E.C.H.O. OF BRANDON, INC.

Current Principal Place of Business:

507 N PARSONS AVE
BRANDON, FL 33510 US

New Principal Place of Business:

Current Mailing Address:

507 N PARSONS AVE
BRANDON, FL 33510 US

New Mailing Address:

FEI Number: 59-3051533 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
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:

EFAW, STACEY
5633 ROCKFIELD LOOP
VALRICO, FL 33594 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CD () Delete
Name: CRAFT, JULIAN
Address: 1513 LIDO DR
City-St-Zip: BRANDON, FL 33510

Title: PD () Delete
Name: JORDAN, BECKY
Address: 1512 CROOKED STICK DR
City-St-Zip: BRANDON, FL 33594

Title: VP () Delete
Name: HINK, GENE
Address: 102 CRESTVIEW DR
City-St-Zip: BRANDON, FL 33511

Title: TD () Delete
Name: FERRARO, VINCE
Address: 217 LITHIA PINECREST DR
City-St-Zip: BRANDON, FL 33511

Title: SD () Delete
Name: DESMARAIS, PEGGY
Address: 1821 DOCKSIDE DR
City-St-Zip: VALRICO, FL 33594

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CD (X) Change () Addition
Name: DAIL, DAN
Address: 4645 JOHN MOORE RD
City-St-Zip: BRANDON, FL 33511

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: WEST, ALLEN
Address: 10028 WATER WORKS LANE
City-St-Zip: RIVERVIEW, FL 33569

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change () Addition
Name: DAVILA, IRMA
Address: 922 MILANO CIR 104
City-St-Zip: BRANDON, FL 33511

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: STACEY EFAW

OD

07/02/2007

Electronic Signature of Signing Officer or Director

Date