

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N50145

FILED
Apr 30, 2007
Secretary of State

Entity Name: HILLSBOROUGH COUNTY BAR ASSOCIATION SECRETARIAL PLACEMENT SERVICES, INC.

Current Principal Place of Business:

201 N FRANKLIN ST.
STE. 1750
TAMPA, FL 33602 US

New Principal Place of Business:

Current Mailing Address:

201 N FRANKLIN ST.
STE. 1750
TAMPA, FL 33602 US

New Mailing Address:

FEI Number: 59-3136863

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PRUITT, CONNIE R. ESQ.
201 N FRANKLIN ST.
STE. 1750
TAMPA, FL 33602 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: P () Delete
Name: STANLEY, DONALD W JR
Address: 202 S. ROME AVE. SUITE 100
City-St-Zip: TAMPA, FL 33606

Title: T () Delete
Name: WALKER, JAMES G
Address: 202 S. ROME AVE
City-St-Zip: TAMPA, FL 33606

Title: VPD () Delete
Name: BLACK, CAROLINE K
Address: 307 S. MAGNOLIA AVE
City-St-Zip: TAMPA, FL 33606

Title: D () Delete
Name: SCRIVEN, LANSING C
Address: 442 W. KENNEDY BLVD. SUITE 280
City-St-Zip: TAMPA, FL 33606

Title: D () Delete
Name: ETHERIDGE, SUSAN G
Address: 4326 W. EL PRADO STE 10
City-St-Zip: TAMPA, FL 33629

Title: M () Delete
Name: PRUITT, CONNIE R
Address: 201 N. FRANKLIN ST. SUITE 1750
City-St-Zip: TAMPA, FL 33602

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BLACK, CAROLINE K
Address: 307 S. MAGNOLIA AVE
City-St-Zip: TAMPA, FL 33606

Title: VPD (X) Change () Addition
Name: BOPP, TOM
Address: 501 E. KENNEDY BLVD.
City-St-Zip: TAMPA, FL 33602

Title: D (X) Change () Addition
Name: HILL, BENJAMIN H VI
Address: 101 E. KENNEDY BLVD. STE 3700
City-St-Zip: TAMPA, FL 33602

Title: D (X) Change () Addition
Name: ANDERSEN, CARTER J
Address: P.O. BOX 3913
City-St-Zip: TAMPA, FL 33601

Title: D (X) Change () Addition
Name: ETHERIDGE, SUSAN G
Address: P.O. BOX 130536
City-St-Zip: TAMPA, FL 33681

Title: () Change () Addition
Name:
Address:
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: CONNIE R. PRUITT

M

04/30/2007

Electronic Signature of Signing Officer or Director

Date