

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N95000000559

1. Entity Name

VOLUSIA COUNTY HISPANIC ASSOCIATION INC.

FILED
Mar 13, 2002 8:00 am
Secretary of State

03-13-2002 90132 017 ****61.25

Principal Place of Business

Mailing Address

1202 SACRAMENTO ST.
DELTONA FL 32725

1202 SACRAMENTO ST.
DELTONA FL 32725

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0549680

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HERNANDEZ, BLANCA
1219 DANDELION DR.
DELTONA FL 32725

Name

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

1830 A. KINGWAY DR

City

DELTONA FL

FL

Zip Code

32738

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.

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

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE DT ☐ Delete
NAME HERNANDEZ, BLANCA I
STREET ADDRESS P.O. BOX 6264 N/A
CITY-ST-ZIP DELTONA FL 32725

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

TITLE T ☐ Delete
NAME IRIZARRY, CARMEN
STREET ADDRESS 1213 VOYAGER ST.
CITY-ST-ZIP DELTONA FL 32725

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

TITLE VPT ☐ Delete
NAME MALDONADO, ISaura
STREET ADDRESS 333 MONTEGO ST
CITY-ST-ZIP DELTONA FL 32725

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

TITLE SOAT ☐ Delete
NAME MALDONADO; BALTAZAR
STREET ADDRESS 333 MONTEGO ST.
CITY-ST-ZIP DELTONA FL 32725

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

TITLE ST ☐ Delete
NAME DENIZA, ZENaida
STREET ADDRESS 2010 MONTECITO AVE
CITY-ST-ZIP DELTONA FL 32738

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)