

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N96000002635

**FILED**  
**Jan 19, 2010**  
**Secretary of State**

**Entity Name:** SHERIFF'S HISPANIC ADVISORY COUNCIL INC.

**Current Principal Place of Business:**

2008 8TH AVENUE  
TAMPA, FL 33605 US

**New Principal Place of Business:**

**Current Mailing Address:**

5364 EHRLICH ROAD  
SUITE 106  
TAMPA, FL 33624 US

**New Mailing Address:**

**FEI Number:** 59-3384069      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

SEGOVIA, ARLENE R  
5364 EHRLICH ROAD  
SUITE 106  
TAMPA, FL 33624 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: PD  
Name: MOREJON, ANTHONY  
Address: 5364 EHRLICH ROADY #106  
City-St-Zip: TAMPA, FL 33624

Title: VPD  
Name: SEGOVIA, ARLENE  
Address: 5364 EHRLICH ROAD #106  
City-St-Zip: TAMPA, FL 33624

Title: SD  
Name: MUGA, RICHARD  
Address: 5364 EHRLICH ROAD #106  
City-St-Zip: TAMPA, FL 33624

Title: TD  
Name: MOREJON, ANA  
Address: 5364 EHRLICH ROAD #106  
City-St-Zip: TAMPA, FL 33624

I hereby 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 all other like empowered.

SIGNATURE: ARLENE SEGOVIA

VP

01/19/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date