2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000003192

FILED May 26, 2009 Secretary of State

Entity Name: PASCO GUARDIANSHIP COUNCIL, INC. **Current Principal Place of Business: New Principal Place of Business:** HUDSON, FL 34667 US **Current Mailing Address: New Mailing Address:** 7236 S.R. 52 HUDSON, FL 34667 US FEI Number: 59-3504967 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: Name and Address of New Registered Agent: HOOK, JOAN NELSON ESQ. 4918 FLORAMAR TERRACE NEW PORT RICHEY, FL 34652 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition REGO, PAULA A SINGH, SERO Name: Name: Address: 7236 SR 52 STE 6 Address: 7334 JENNIFER STREET City-St-Zip: BAYONET POINT, FL 34667 US City-St-Zip: PORT RICHEY, FL 34668 US Title: VD () Delete Title: () Change () Addition Name: COFFEY, DOUG Name: Address: 14605 COFFEY LANE Address: City-St-Zip: HUDSON, FL 34667 City-St-Zip: () Delete Title: Title: () Change () Addition THERRELL, MARK D III Name: Name: Address: 7236 SR 52 STE 6 Address: City-St-Zip: HUDSON, FL 34667 City-St-Zip: Title: SD (X) Delete Title: () Change () Addition Name: MAXWELL, SARGENT Name: Address: 6015 SANDRA DR Address: City-St-Zip: SPRING HILL, FL 34607 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: SEROMONEY SINGH TD 05/26/2009