

NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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FILED
Mar 20, 2008 8:00 A.M.
Secretary of State

DOCUMENT # N97000005163 1. Entity Name PHILIPPINE-AMERICAN CORPORATION OF FLORIDA					
Principal Place of Business 823 N. Cherry Pop Dr. Inverness, FL 34453		Mailing Address 823 N. Cherry Pop Dr. Inverness, FL 34453			
2. Principal Place of Business - No P.O. Box # 823 N. Cherry Pop Dr. Suite, Apt. #, etc. Inverness, FL 34453		3. Mailing Address 823 N. Cherry Pop Dr. Suite, Apt. #, etc. Inverness FL 34453			
City & State Inverness, FL		City & State Inverness, FL			
Zip 34453		Zip 34453			
Country USA		Country USA			
4. FEI Number 59-3466349					
5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required					
6. Name and Address of Current Registered Agent ZEHM, NENA L 27 ROOSEVELT BLVD. P.O BOX 640654 BEVERLY HILLS, FL 34465 Above person had resigned					
7. Name and Address of New Registered Agent Name Purita Miravite Trompeta Street Address (P.O. Box Number is Not Acceptable) 823 N. Cherry Pop Dr. City Inverness FL Zip Code 34453					
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, to the State of Florida, and accept the obligations of registered agent. SIGNATURE <i>Purita M. Trompeta</i> Purita Miravite Trompeta Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when re-registering)					
Amended AR is \$61.25		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Add CALANTINO, NICK 1858 ELDER BERRY LANE INVERNESS, FL 34453	☐ Delete	11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Add ABERLE, MARK 96 PINE ST HOMOSASSA, FL 34446	☐ Delete	☐ Change ☒ Addition Chairman of the Board Romulo Postadan 799 N. Cherry Pop Dr. Inverness FL 34453		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Add YAREMA, SUSIE 5979 SW 42ND STREET BUSHNELL, FL 33516	☐ Delete	☐ Change ☒ Addition President Purita Miravite Trompeta, M.A. 823 N. Cherry Pop Dr. Inverness, FL 34453		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Add YAREMA, JOHN 5979 SW 42ND STREET BUSHNELL, FL 33516	☐ Delete	☐ Change ☒ Addition Executive Vice President Fortunato Soriano, M.D. 546 Fenway Dr. Hernando, FL 34442		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Add KILGOS, GLENN 704 HEMLOCK STREET INVERNESS, FL 344525939	☐ Delete	☐ Change ☒ Addition Vice President Dick Larumbe, M.D. 339 W. Redsox Path Hernando, FL 34442		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Add DULCE, BEVERLY 640 N MAN-O-WAR INVERNESS, FL 34453	☐ Delete	☐ Change ☒ Addition Director, Sec. Secretary Beth Tarnowski 178 Pine St. Homosassa FL 34446		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <i>Purita M. Trompeta</i> Purita Miravite Trompeta		March 18, 2008 (352) 637-5462			

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2002

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Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State Inverness FL 34453		City & State Inverness, FL 34453			
Zip		Country		10262007 Chg-NP CR2E037 (12/06)	
4. FEI Number 59-3466349				Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☒				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent ZEHM, NENA L 27 ROOSEVELT BLVD. P.O BOX 640654 BEVERLY HILLS, FL 34465 Above person had resigned			7. Name and Address of New Registered Agent Name Purita Miravite Trompeta Street Address (P.O. Box Number is Not Acceptable) 823 N. Cherry Pop Dr. City Inverness, FL Zip Code 34453		
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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <u>Purita M. Trompeta</u> March 18, 20008 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering) DATE					
Amended AR is \$61.25		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD CALANTINO, NICK 1858 ELDER BERRY LANE INVERNESS, FL 34453 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director ☐ Change ☒ Addition Mila Tyndall 6427 N. Amythyst Terrace Crystal River, FL 34426		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD ABERLE, MARK 96 PINE ST HOMOSASSA, FL 34446 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director ☐ Change ☒ Addition Petronila Suris 3852 S. Hillston Fl. Homosassa FL 34448		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD YARSMA, SUSIE 5979 SW 42ND STREET BUSHNELL, FL 33516 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Board Consultant, Finance ☐ Change ☒ Addition Virginia Postadan 792 N. Cherry Pop Dr. Inverness FL 34453		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD YAREMA, JOHN 5979 SW 42ND STREET BUSHNELL, FL 33516 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD KILGOS, GLENN 704 HEMLOCK STREET INVERNESS, FL 344525939 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VDP DULCE, BEVERLY 640 N MAN-O-WAR INVERNESS, FL 34453 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 Ikg empowered.					
SIGNATURE: <u>Purita M. Trompeta</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		March 18, 20008		352 637-5462 Daytime Phone #	