2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 11, 2007
Secretary of State

DOCUMENT# N97000006982

Entity Name: THE HILLMYER-TREMONT STUDENT ATHLETE FOUNDATION, INC.

Current Principal Place of Business:

10481 SIX MILE CYPRESS PARKWAY
FORT MYERS, FL 33912

New Principal Place of Business:

Current Mailing Address:

8961 CONFERENCE DRIVE
SUITE 2
FORT MYERS, FL 33919

New Mailing Address:

FEI Number: 65-0803239 **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:

STROEMER TUSCAN & COMPANY
8961 CONFERENCE DRIVE
SUITE 2
FORT MYERS, FL 33919 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	( ) Delete
Name:	HILLMYER, BARRY	
Address:	10481 SIX MILE CYPRESS PARKWAY	
City-St-Zip:	FORT MYERS, FL 33912	
Title:	VPD	( ) Delete
Name:	STROEMER, JOHN H CPA	
Address:	8961 CONFERENCE DRIVE, SUITE 2	
City-St-Zip:	FORT MYERS, FL 33919	
Title:	STD	( ) Delete
Name:	MCMURRAY, DARIN ESQ	
Address:	7866 GO CANES WAY	
City-St-Zip:	FORT MYERS, FL 33912	
Title:	D	( ) Delete
Name:	CRIMALDI, SAM B	
Address:	10481 SIX MILE CYPRESS PKWY	
City-St-Zip:	FORT MYERS, FL 33912	
Title:	D	( ) Delete
Name:	MAZZOLA, JOSEPH	
Address:	7751 BAYSHORE ROAD	
City-St-Zip:	NORTH FORT MYERS, FL 33917	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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: JOHN H. STROEMER VP 05/11/2007
Electronic Signature of Signing Officer or Director — Date