## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N98000000203

FILED Jul 02, 2004 Secretary of State

Entity Name: HERNANDO EDUCATION AND ARTS PARTNERSHIP, INC.

Current Principal Place of Business: New Principal Place of Business:

38 PINEWOOD CIRCLE 36 CRANE DRIVE

SAFETY HARBOR, FL 34695 US SAFETY HARBOR, FL 34695 US

Current Mailing Address: New Mailing Address:

38 PINEWOOD CIRCLE 36 CRANE DRIVE

SAFETY HARBOR, FL 34695 US SAFETY HARBOR, FL 34695 US

FEI Number: 59-3489827 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

SEYFERTH, RAY
38 PINEWOOD CIRCLE
36 CRANE DRIVE

SAFETY HARBOR, FL 34695 US SAFETY HARBOR, FL 34695 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: 07/02/2004

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SD ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 DEANGELIS, CHRISTOPHER
 Name:

 Address:
 11113 NORRELL RD
 Address:

 City-St-Zip:
 SPRING HILL, FL 34608
 City-St-Zip:

Title: PTD ( ) Delete Title: PTD (X) Change ( ) Addition

Name: SEYFERTH, THELMA Name: SEYFERTH, THELMA
Address: 38 PINEWOOD CIRCLE Address: 36 CRANE DRIVE

City-St-Zip: SAFETY HARBOR, FL 34695 US City-St-Zip: SAFETY HARBOR, FL 34695 US

 $\label{eq:title: VD (X) Change () Addition} \begin{tabular}{ll} Title: & VD & (X) Change () Addition \\ \end{tabular}$ 

Name: SEYFERTH, RAY Name: SEYFERTH, RAY

Address: 38 PINEWOOD CIRCLE Address: 36 CRANE DRIVE

City-St-Zip: SAFETY HARBOR, FL 34695 City-St-Zip: SAFETY HARBOR, FL 34695

I hereby certify that the information supplied with this filing does not qualify for the 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 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: THELMA SEYFERTH PTD 07/02/2004