

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000004638

FILED
Aug 31, 2006
Secretary of State

Entity Name: HANNAH'S BUDDIES, INC., AN ANDREW'S BUDDIES CHAPTER

Current Principal Place of Business:

719 S ORLEANS AVE
TAMPA, FL 33606

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 14457
TAMPA, FL 33690

New Mailing Address:

POST OFFICE BOX 320528
TAMPA, FL 33679

FEI Number: 59-3527816 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
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:

HUNT, TIMOTHY A
101 E. KENNEDY BLVD.
SUITE 3700
TAMPA, FL 33602 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: ELLIOTT, DUNCAN
Address: 719 SOUTH ORLEANS AVENUE
City-St-Zip: TAMPA, FL 33606

Title: VSD () Delete
Name: ELLIOTT, LAURIE
Address: 719 SOUTH ORLEANS AVENUE
City-St-Zip: TAMPA, FL 33606

Title: TD () Delete
Name: HUNT, LEIGH F
Address: 500 SEVERN AVENUE
City-St-Zip: TAMPA, FL 33606

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:

I hereby certify that the information supplied with this filing does not qualify for the 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: LAURIE ELLIOTT

VSD

08/31/2006

Electronic Signature of Signing Officer or Director

Date