

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000005169

FILED
Mar 25, 2010
Secretary of State

Entity Name: A NEW GENERATION OF HERNANDO, INC.

Current Principal Place of Business:

134 E FT DADE AVE
BROOKSVILLE, FL 34601

New Principal Place of Business:

Current Mailing Address:

P O BOX 1935
BROOKSVILLE, FL 34605

New Mailing Address:

FEI Number: 59-3596705

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WOODRUFF, SHAWN
4195 NEFF LAKE RD
BROOKSVILLE, FL 34601 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
Name: CALLAGHAN, KEVIN
Address: 25086 ANGEL STREET
City-St-Zip: BROOKSVILLE, FL 34601

Title: SD
Name: WOODRUFF, SHAWN
Address: 4195 NEFF LAKE ROAD
City-St-Zip: BROOKSVILLE, FL 34601

Title: VP
Name: KESSEL, ERIC
Address: 408 LAW STREET
City-St-Zip: BROOKSVILLE, FL 34601

Title: TD
Name: WOODRUFF, SHAWN
Address: 4195 NEFF LAKE RD
City-St-Zip: BROOKSVILLE, FL 34601

Title: D
Name: KEYES, KATHLEEN
Address: 221 LARK AVENUE
City-St-Zip: BROOKSVILLE, FL 34601

Title: D
Name: EVERHARD, MATTHEW REV.
Address: 1510 SABRA DRIVE
City-St-Zip: BROOKSVILLE, FL 34601

I hereby 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 all other like empowered.

SIGNATURE: SHAWN WOODRUFF

TREA

03/25/2010

Electronic Signature of Signing Officer or Director

Date