

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000005169

**FILED**  
**Apr 12, 2011**  
**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 (X)**

**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: 15269 BRICE DRIVE  
City-St-Zip: BROOKSVILLE, FL 34601

Title: SD  
Name: HEIDLER, KAREN  
Address: 13437 TRITON DRIVE  
City-St-Zip: BROOKSVILLE, FL 34609

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

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

04/12/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date