

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000076812

Entity Name: HERNANDO RECOVERY, INC.

FILED
Sep 03, 2005
Secretary of State

Current Principal Place of Business:

1555 EAST JEFFERSON STREET
BROOKSVILLE, FL 34601

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 187
BROOKSVILLE, FL 346050187 US

New Mailing Address:

FEI Number: 59-3753061

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RITCHOTTE, WILLIAM J
P.O. BOX 1207
BROOKSVILLE, FL 346051207 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MOHOLLAND, MICHAEL L
Address: P.O. BOX 1207
City-St-Zip: BROOKSVILLE, FL 346051207

Title: D () Delete
Name: RITCHOTTE, JOAN
Address: 21427 CAMPBELL DRIVE
City-St-Zip: BROOKSVILLE, FL 34601

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHAEL MOHOLLAND

PRES

09/03/2005

Electronic Signature of Signing Officer or Director

Date