

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000076812

FILED
Jan 17, 2008
Secretary of State

Entity Name: HERNANDO RECOVERY, INC.

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
21427 CAMPBELL DR
BROOKSVILLE, FL 34601 US

Name and Address of New Registered Agent:

MOHOLLAND, MICHAEL L
14053 ALLSTON AVE
SPRING HILL, FL 34605 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: MICHAEL MOHOLLAND

01/17/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MOHOLLAND, MICHAEL L
Address: 14053 ALLSTON AVE
City-St-Zip: SPRING HILL, FL 34609

Title: T () Delete
Name: RITCHOTTE, JOAN
Address: 87 RIVER ROAD, #20, P.O. BOX 102
City-St-Zip: PITTSFIELD, NH 03263

Title: D () Delete
Name: DELEO, SANDRA
Address: 21415 CAMPBELL DR
City-St-Zip: BROOKSVILLE, FL 34601

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: FLETCHER, JEFFREY
Address: 8383 NITTANY RD
City-St-Zip: WEEKI WACHEE, FL 34613

Title: T (X) Change () Addition
Name: DELEO, SANDRA
Address: 21415 CAMPBELL DR
City-St-Zip: BROOKSVILLE, FL 34601

Title: D () Change (X) Addition
Name: RITCHOTTE, JOAN
Address: 87 RIVER ROAD, #20,
City-St-Zip: PITTSFIELD, NH 03263

I hereby certify that the information supplied with this filing does not qualify 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 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

01/17/2008

Electronic Signature of Signing Officer or Director

Date