



FILED
Apr 18, 2007 08:00 AM
Secretary of State

DOCUMENT # P94000048472 1. Entity Name HANNA PROPERTIES CORP.				Apr 18, 2007 08:00 Secretary of State	
Principal Place of Business 2515 E. HANNA AVENUE TAMPA, FL 33610 US		Mailing Address 19910 GULF BLVD. 401 INDIAN SHORES, FL 33785 US			
DO NOT WRITE IN THIS SPACE					
				02262007 No Chg-P CR2E034 (11/05)	
				4. FEI Number 59-3253940	
				Applied For Not Applicable	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent JURADO, TERESA 1910 GULF BLVD. APT. 401 INDIAN SHORES, FL 33785				DO NOT WRITE IN THIS SPACE	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <u>Teresa Jurado</u> <u>Teresa Jurado</u> <u>4-15-07</u> <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY - ST - ZIP		VPD JURADO, JAIME C/O 2515 E. HANNA AVE. TAMPA, FL 33610			
TITLE NAME STREET ADDRESS CITY - ST - ZIP		PD PASETTI, LAWRENCE C/O 2515 E. HANNA AVE. TAMPA, FL			
TITLE NAME STREET ADDRESS CITY - ST - ZIP		SD DAVIDSON, JAMES R C/O 2515 E. HANNA AVE. TAMPA, FL			
TITLE NAME STREET ADDRESS CITY - ST - ZIP		D LOCICERO, ANTHONY C/O 2515 E. HANNA AVE. TAMPA, FL			
TITLE NAME STREET ADDRESS CITY - ST - ZIP		ATD SIERRA, FRANK J C/O 2515 E. HANNA AVE. TAMPA, FL 33610			
TITLE NAME STREET ADDRESS CITY - ST - ZIP		T JURADO, TERESA 19910 GULF BLVD. APT. 401 INDIAN SHORES, FL 33785			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. SIGNATURE: <u>Jaime Jurado</u> Director - Jaime Jurado 4-15-07 (727)596-7587 <small>Signature and typed or printed name of signing officer or director Date Daytime Phone #</small>					