2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

Feb 14, 2008 8:00 am Secretary of State DOCUMENT # N94000000761 1. Entity Name 02-14-2008 90060 001 ****61.25 MARINE CORPS MUSICIANS ASSOCIATION 02-14-2008 90060 002 *****8.75 **INCORPORATED** Principal Place of Business Mailing Address 2733 ADRIAN ST. SAN DIEGO CA 92110-5711 2733 ADRIAN ST. SAN DIEGO CA 92110-5711 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apr. #, etc. 1st MOORE CR2E037 (10/07) Applied For City & State City & State 4. FEI Number 59-1595030 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name YOUNG, ALBERT G Street Address (P.O. Box Number is Not Acceptable) 2917 WILDERNESS BLVD W. PARRISH FL 34219 Zip Code 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 Signature, typod or printed name of registered agent and title if approache. CATE (NOTE: Registered Agent signature registed when reinstating) FILE NOW: FEE IS \$61.25. 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Due By May 1, 2008 Trust Fund Contribution. Florida Department of State Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 - OFFICERS AND DIRECTORS 10. 11. TITLE ☐ Change Addition TITLE Delete SCHWEITZER, STEVEN R NAME , NAME 2733 ADRIAN ST. STREET ADDRESS STREET ADDRESS SAN DIEGO CA 92110-5711 CITY-ST-ZIP CITY-ST-ZIP ☐ Delate ☐ Change ☐ Addition TITLE TITLE SOKOL, JOHN M NAME NAME 2087 BARTON ST. STREET ADDRESS STREET ADDRESS CITY- ST-7IP WYANDOTTE MI 48192 CITY-ST-ZIP ___ Addition TITLE Delete TITLE Change SIXTY, CORNELIUS W NAME HAME STREET ADDRESS W243 N2358 SADDLE BROOK DR., #301 STREET ADDRESS CITY- ST- 7/P PEWAUKEE WI 53072 CITY-ST-7IP DMT ☐ Delete ☐ Change Addition TITLE TITLE OLDENBURG, RICHARD NAME NAME 25101 BEAR VALLEY RD. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP TEHACHAPI CA 93561-8311 CITY-ST-ZIP SDT THLE ☐ Delete TITLE ☐ Change neilibbA 🔲 RICE, JAY NAME NAME 301 CALLE FELICIDAD STREET ACORESS STREET ADDRESS SAN CLEMENTE CA 92672-2204 CITY-ST-ZIP CITY-ST-7/P ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CHY-ST-ZIP CITY-ST-ZIP

FILED

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 617, 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.

(760)

SIGNATURE:

Schweitzer Feb Y, 2008 224-5516