

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 719456

FILED
Jan 04, 2007
Secretary of State

Entity Name: MUSICALE & FEDERATED CLUBS, INC.

Current Principal Place of Business:

809 HORATIO STREET
TAMPA, FL 33606 US

New Principal Place of Business:

Current Mailing Address:

1402 S. OREGON CIRCLE
TAMPA, FL 33612 US

New Mailing Address:

FEI Number: 59-3376509

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HUETING, FRED W
1402 S. OREGON CIR
TAMPA, FL 33612 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: VD () Delete
Name: SETLOW, DOT
Address: 104 W. LAMBRIGHT
City-St-Zip: TAMPA, FL 33604

Title: VD () Delete
Name: BALEN, DOROTHY
Address: 608 S. DAKOTA
City-St-Zip: TAMPA, FL 33606

Title: PD () Delete
Name: MANDESE, VIOLET
Address: 3701 W/ DALE AVE.
City-St-Zip: TAMPA, FL 336093903

Title: D () Delete
Name: CLEMMONS, BARBARA
Address: 3424 HUNTERS RUN LANE
City-St-Zip: TAMPA, FL 33614

Title: TD () Delete
Name: HUETINE, FREDERICK
Address: 1402 S. OREGON CIR
City-St-Zip: TAMPA, FL 33612

Title: SD () Delete
Name: NICHOLSON, CAROLYN
Address: 2604 JETTON AVE.
City-St-Zip: TAMPA, FL 33629

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

SIGNATURE: FRED W.HUETING

T

01/04/2007

Electronic Signature of Signing Officer or Director

Date