2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#730995

FILED May 10, 2007 Secretary of State

Entity Name: CENTRAL FLORIDA JAZZ SOCIETY, INC.

US

Current Principal Place of Business: New Principal Place of Business:

PO BOX 540133 609 N EOLA DR #3

ORLANDO, FL 328540133

ORLANDO, FL 32803

Current Mailing Address: New Mailing Address:

PO BOX 540133

ORLANDO, FL 328540133

FEI Number: 59-2546658 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BETROS, EDWARD 609 N. EÓLA DR. #3 ORLANDO, FL 32803

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition

PUQUA, JEAN FUQUA, JEAN Name: Name: 425 ANDRES AVE Address: 425 ANDRES AVE Address: ORLANDO, FL 32807 City-St-Zip: City-St-Zip: ORLANDO, FL 32807

Title: () Delete Title: (X) Change () Addition

BETROS, EDWARD Name: Name: BETROS, EDWARD Address: P.O. BOX 568826 Address: P.O. BOX 568826 City-St-Zip:

ORLANDO, FL 328568826 City-St-Zip: ORLANDO, FL 328568826

Title: () Delete Title: () Change () Addition

LOWE, MOE Name: Name: 80 OAKLEIGH AVE Address: Address: City-St-Zip: MAITLAND, FL 32751 City-St-Zip:

Title: 2VP () Delete Title: () Change () Addition

Name: MARCHESANO, SONJA Name: 984 STONE WOOD LANE Address: Address: City-St-Zip: MAITLAND, FL 32751 City-St-Zip:

Title: () Delete Title: (X) Change () Addition

WEINBERG, KAREN WEINBERG, KAREN Name: Name: 1011 CANDVIA AVE. 1011 CANDVIA AVE. Address: Address: City-St-Zip: ORLANDO, FL 32804 City-St-Zip: ORLANDO, FL 32804

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

SIGNATURE: KAREN WEINBERG S 05/10/2007