

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 14, 2008 08:00 AM
Secretary of State

DOCUMENT # G22735

1. Entity Name
EXUMA SOUND, INC.



Principal Place of Business
**9035 AMERICANA ROAD
SUITE 18
VERO BEACH, FL 32966**

Mailing Address
**9035 AMERICANA ROAD
SUITE 18
VERO BEACH, FL 32966**



01112008 No Chg-P CR2E034 (11/05)

4. FEI Number **59-2263274** Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**LAPPAS, JAMES
9035 AMERICANA ROAD
SUITE 18
VERO BEACH, FL 32966**

**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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

**U000000783573
01/16/08-80020-011 150.00**

10. OFFICERS AND DIRECTORS

TITLE **P**
NAME **GRINBERG, MARTA**
STREET ADDRESS **637 VICKERS ST**
CITY-ST-ZIP **SEBASTIAN, FL 329584457**

TITLE **V**
NAME **LAPPAS, JAMES**
STREET ADDRESS **4805 16TH ST**
CITY-ST-ZIP **VERO BEACH, FL 329662370**

TITLE **S**
NAME **LAPPAS, NORMA**
STREET ADDRESS **4805 16TH ST**
CITY-ST-ZIP **VERO BEACH, FL 329662370**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

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 an other like empowered.

SIGNATURE: James Lappas **JAMES LAPPAS - 11 JANUARY 2008 - (772) 770-1823**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #