2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000004993

Entity Name: LEON FRIENDS OF MUSIC, INC.

FILED Aug 30, 2007 Secretary of State

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

550 E. TENNESSEE ST. TALLAHASSEE, FL 32308

Current Mailing Address: New Mailing Address:

550 E. TENNESSEE ST. TALLAHASSEE, FL 32308

FEI Number: 31-1742606 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:

ARTHUR, JUDY R 550 E. TENNESSEE ST. TALLAHASSEE, FL 32308 US

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 () Change () Addition

ARTHUR, JUDY R Name: Name: Address: 272 TIMBERLANE RD. Address: City-St-Zip: TALLAHASSEE, FL 32312 City-St-Zip:

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

Name: CORVEN, BARBARA Name: PENNY, FOLSOM Address: 2648 EGRET LANE Address: 3209 LAKE SHORE DR City-St-Zip: TALLAHASSEE, FL 32308 City-St-Zip: TALLAHASSEE, FL 32312

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

GUYTON, MARGARET Name: Name: 2605 MARSTON RD. Address: Address: City-St-Zip: TALLAHASSEE, FL 32308 City-St-Zip:

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

Name: PULLEN, DEBBIE Name: 1300 E. CONSERVANCY DR. Address: Address: City-St-Zip: TALLAHASSEE, FL 32312 City-St-Zip:

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

HALL, TABITHA L HALL, TABITHA L Name: Name: 631 EAST CALL ST STOKLEY LANE Address: Address:

City-St-Zip: TALLAHASSEE, FL 32301 City-St-Zip: TALLAHASSEE, FL 32303

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: JUDY R.ARTHUR D 08/30/2007