2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0000005292

Entity Name: FALCON SOUND ALLIANCE, INC.

FILED Feb 13, 2008 Secretary of State

Current Principal Place of Business:			New Princi	New Principal Place of Business:	
12800 TAF	N HIGH SCHOOL T STREET E PINES, FL 3302	28 US			
Current Mailing Address:			New Mailir	New Mailing Address:	
10211 PINES BOULEVARD PMB 214 PEMBROKE PINES, FL 33026 US					
FEI Number:	65-1032914 FE	El Number Applied For()	FEI Number Not Appli	cable () Certificate of Status Desired ()	
Name and	Address of Curre	ent Registered Agent:	Name and	Address of New Registered Agent:	
OIEN, TERRI 1610 SW 120 TERRACE PEMBROKE PINES, FL 33025 US					
The above in the State		nits this statement for the purp	pose of changing it	s registered office or registered agent, or both,	
SIGNATURE:					
Electronic Signature of Registered Agent				Date	
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () Dele SCHMIDT, DEBBIE 2050 NW 138 TERR PEMBROKE PINES,	ACE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	PD () Dele SCHMIDT, WILLIAM 2050 NW 138 TERR PEMBROKE PINES,	ACE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	V () Dele HARRY, PAM 1520 NW 122 AVENU PEMBROKE PINES,	UE	Title: Name: Address: City-St-Zip:	V (X) Change () Addition PRADA, BETH 853 NW 135TH AVENUE PEMBROKE PINES, FL 33028	
Title: Name: Address: City-St-Zip:	V () Dele PENOVI, GINNY 1172 N HIATUS ROA PEMBROKE PINES,	AD.	Title: Name: Address: City-St-Zip:	V (X) Change () Addition DEGENNARO, CINDY 2145 NW 140TH AVENUE PEMBROKE PINES, FL 33028	
Title: Name: Address: City-St-Zip:	DT () Dele OIEN, TERRI 1610 SW 120 TERR PEMBROKE PINES,	ACE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S () Dele DEGENNARO, CIND 2145 NW 140 AVENU PEMBROKE PINES,	Y UE	Title: Name: Address: City-St-Zip:	S (X) Change () Addition MORALES, HOLLY 15650 SW 16TH CT PEMBROKE PINES, FL 33027	

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: TERRI OIEN DT 02/13/2008