2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000005247

Entity Name: FLORIDA MACINTOSH USERS GROUP, INC.

FILED Apr 14, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 7121 NATHAN COURT WINTER PARK, FL 32792 **Current Mailing Address: New Mailing Address:** P O BOX 536296 ORLANDO, FL 32853 FEI Number: 59-3750813 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WALKER, JEF 7121 NATHAN COURT WINTER PARK, FL 32792 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: **PRES PRES** () Delete (X) Change () Addition VARGAS, CARLOS IV MOUSSEAU, SCOTT Name: Name: 17516 LAKESHORE DRIVE Address: 1620 EOLA CIRCLE Address: City-St-Zip: WINTER GARDEN, FL 34787 City-St-Zip: KISSIMMEE, FL 34741 US Title: Title: SECT (X) Change () Addition () Delete RABAC, RYAN Name: SPAIN, MARK Name: Address: 10555 SATINWOOD CIRCLE Address: 3361 CALCUTTA AVENUE City-St-Zip: ORLANDO, FL 32825 City-St-Zip: ORLANDO, FL 32817 US Title: TRES () Delete Title: **TRES** (X) Change () Addition WALKER, JEF WALKER, JEF Name: Name: 7121 NATHAN COURT 7121 NATHAN COURT Address: Address: City-St-Zip: WINTER PARK, FL 32792 City-St-Zip: WINTER PARK, FL 32792 US Title: SECT () Delete Title: DIR (X) Change () Addition Name: SPAIN, MARK Name: SELLERS, WALT Address: 3361 CALCUTTA AVENUE Address: 3809 GREYSTONE LEGEND PL City-St-Zip: ORLANDO, FL 32817 City-St-Zip: OVIEDO, FL 32765 US Title: () Delete Title: () Change (X) Addition GRIEVE, DAVID Name: Name: 1195 OAK CREEK COURT Address: Address: City-St-Zip: City-St-Zip: WINTER SPRINGS, FL 32708 US Title: () Delete Title: () Change (X) Addition FELDMAN, EDWARD Name: Name: Address: Address: 6107 LOGAN HEIGHTS CIR

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.

City-St-Zip:

SANFORD, FL 32773 US

SIGNATURE: JEF WALKER TRES 04/14/2009

City-St-Zip: