2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 19, 2009
Secretary of State

DOCUMENT# N01128

Entity Name: JAZZ SOCIETY OF PENSACOLA, INC.

Current Principal Place of Business:

17 SOUTH PALAFOX STREET
SUITES 103-105
PENSACOLA, FL 32502

New Principal Place of Business:

Current Mailing Address:

PO BOX 18337
PENSACOLA, FL 325238337

New Mailing Address:

FEI Number: 59-2528174 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

METZGER, ANDREW MR
17 SOUTH PALAFOX STREET
SUITES 103-105
PENSACOLA, FL 32502 US

Name and Address of New Registered Agent:

LYON, KATHRYN MS
17 SOUTH PALAFOX STREET
SUITES 103-105
PENSACOLA, FL 32502 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: KATHRYN A. LYON 02/19/2009
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: MINNICH, CHUCK MR
Address: 2979 CORSAIR DR
City-St-Zip: PENSACOLA, FL 32507 US

Title: D ( ) Delete
Name: ALBERT, CRYSTAL MS
Address: 6511 CALLE DE LAGO
City-St-Zip: NAVARRE, FL 32566 US

Title: D ( ) Delete
Name: VICKERS, NORMAN MR
Address: 3720 MCCLELLAN RD
City-St-Zip: PENSACOLA, FL 32503 US

Title: D ( ) Delete
Name: PERRY, GLEN MR
Address: 2017 EVENTIDE ROAD
City-St-Zip: MILTON, FL 325839529 US

Title: D ( ) Delete
Name: MATTHEWS, JOHN MR
Address: 5119 CHANDELLE DR
City-St-Zip: PENSACOLA, FL 325078135 US

Title: D ( ) Delete
Name: VILLINES, ROGER MR
Address: 6270 WINDWOOD DR
City-St-Zip: PENSACOLA, FL 32504 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: ROGER VILLINES PRES 02/19/2009
Electronic Signature of Signing Officer or Director — Date