## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N03000008901

FILED Apr 25, 2007 Secretary of State

Entity Name: ORLANDO ACOUSTIC GUITAR SOCIETY, INC.

**Current Principal Place of Business: New Principal Place of Business:** 3402 MANITOU DRIVE ORLANDO, FL 32839 **Current Mailing Address: New Mailing Address:** 3402 MANITOU DRIVE ORLANDO, FL 32839 FEI Number: 20-0362708 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: BECKER, WILLARD 3402 MANITOU DRIVE US ORLANDO, FL 32839 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: PSTD () Delete () Change () Addition BECKER, WILLARD Name: Name: 3402 MANITOU DRIVE Address: Address: City-St-Zip: ORLANDO, FL 32839 City-St-Zip: Title: VD () Delete Title: VD (X) Change ( ) Addition MINEGAR, CRAIG A Name: MINEGAR, CRAIG A Name: Address: 250 PARK AVE S 5TH FL Address: 329 PARK AVE. 2ND. FLOOR City-St-Zip: WINTER PARK, FL 32789 City-St-Zip: WINTER PARK, FL 32789 Title: VD () Delete Title: () Change () Addition POWELL, THOMAS E Name: Name: 1938 MAPLE LEAF DR Address: Address: City-St-Zip: WINDERMERE, FL 34786 City-St-Zip: Title: Title: () Change () Addition ( ) Delete WHITACRE, WILLIAM L. Name: Name: 730 MOJAVE TRAIL Address: Address: City-St-Zip: MAITLAND, FL 32751 City-St-Zip: Title: () Delete Title: () Change () Addition CALTON, TOMMY Name: Name: 10019 CREEKWATER ROAD Address: Address: City-St-Zip: ORLANDO, FL 32825 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition EPPERSON, KEN HORN, DENNIS Name: Name: Address: 357 AMETHYST CT Address: 118 CHUTNEY DRIVE LAKE MARY, FL 32747 ORLANDO, FL 32825 City-St-Zip: 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: WILLARD BECKER PSTD 04/25/2007