

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000010656

FILED
Feb 22, 2008
Secretary of State

Entity Name: THE SOUNDS OF JOY, INC.

Current Principal Place of Business:

8735 SE 61ST AVE.
OCALA, FL 34472

New Principal Place of Business:

3233 S.E. 110TH STREET
LOT 13
OCALA, FL 34480

Current Mailing Address:

8735 SE 61ST AVE.
OCALA, FL 34472

New Mailing Address:

3233 S.E. 110TH STREET
LOT 13
OCALA, FL 34480

FEI Number: 61-1462059

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BENNETT, GARY
8735 SE 61ST AVE.
OCALA, FL 34472 US

Name and Address of New Registered Agent:

BENNETT, GARY T
3233 S.E. 110TH STREET
LOT 13
OCALA, FL 34480 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: GARY T BENNETT

02/22/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BENNETT, GARY
Address: 8735 SE 61ST AVE.
City-St-Zip: OCALA, FL 34472

Title: D () Delete
Name: PAXTON, ROBERT J
Address: 6791 SE 54TH ST.
City-St-Zip: OCALA, FL 34472

Title: D () Delete
Name: RILEY, LINDA
Address: 4111 NE 22ND AVE.
City-St-Zip: OCALA, FL 34479

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: BENNETT, GARY T
Address: 3233 S.E. 110TH STREET, LOT 13
City-St-Zip: OCALA, FL 34480

Title: D (X) Change () Addition
Name: HILL, LAURENCE E
Address: 5017 S.E. 145TH PLACE
City-St-Zip: SUMMERFIELD, FL 34491

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: GARY T BENNETT

D

02/22/2008

Electronic Signature of Signing Officer or Director

Date