2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000007942

Entity Name: LIVING SOUND, INC.

FILED Apr 30, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 5717 15TH AVENUE NORTH SAINT PETERSBURG, FL 33710 **Current Mailing Address: New Mailing Address:** 6822 22ND AVENUE NORTH SAINT PETERSBURG, FL 33710 FEI Number: 51-0472558 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of New Registered Agent: Name and Address of Current Registered Agent: SPIEGEL & UTRERA, P.A. 1840 SW 22ND STREET, 4TH FLOOR MIAMI, FL 33145 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: PSD () Delete (X) Change () Addition ALLEN, DIANNE A ALLEN, DIANNE A Name: Name: 5717 15TH AVENUE NORTH Address: 5717 15TH AVENUE NORTH Address: City-St-Zip: SAINT PETERSBURG, FL 33710 City-St-Zip: SAINT PETERSBURG, FL 33710 Title: Title: (X) Change () Addition () Delete MARSHALL, LISA Name: MARSHALL, LISA Name: Address: 5717 15TH AVENUE NORTH Address: 5025 54TH WAY NORTH City-St-Zip: SAINT PETERSBURG, FL 33710 City-St-Zip: SAINT PETERSBURG, FL 33710 Title: VTD () Delete Title: (X) Change () Addition KELSO, TRACY KELSO, TRACY Name: Name: Address: 4041 24TH AVENUE NORTH Address: 4041 24TH AVENUE NORTH City-St-Zip: SAINT PETERSBURG, FL 33713 City-St-Zip: SAINT PETERSBURG, FL 33713 Title: () Delete Title: () Change (X) Addition Name: Name: BLAIR, ANDERSON 4341 AUSTON WAY Address: Address: City-St-Zip: City-St-Zip: PALM HARBOR, FL 34685 Title: () Delete Title: () Change (X) Addition MANNIX, RAYMOND Name: Name: 2437 10TH AVENUE SW Address: Address: City-St-Zip: City-St-Zip: LARGO, FL 33770 Title: () Delete Title: () Change (X) Addition CUMMINGS, DOUGLAS Name: Name: Address: Address: 1600 BEACH DR NE ST.PETERSBURG, FL 33704 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: DIANNE ALLEN P 04/30/2008