

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000010264

FILED
Jan 15, 2008
Secretary of State

Entity Name: FLORIDA LOCAL USERS' GROUP, INC.

Current Principal Place of Business:

2500 MAITLAND CENTER PARKWAY
SUITE 300
MAITLAND, FL 32751 US

New Principal Place of Business:

Current Mailing Address:

2500 MAITLAND CENTER PARKWAY
SUITE 300
ORLANDO, FL 32751 US

New Mailing Address:

FEI Number: 59-3791931

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHNEEBERGER, JOE A
2500 MAITLAND CENTER PARKWAY
SUITE 300
MAITLAND, FL 32751 US

Name and Address of New Registered Agent:

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:

Title: D () Delete
Name: HARRIMAN, MARILYN
Address: 1700 N. ORANGE AVE., SUITE 400
City-St-Zip: ORLANDO, FL 32804

Title: D () Delete
Name: HENRY, DAVID
Address: SGS SPACE GATEWAY SUPPORT SGS-637
City-St-Zip: KENNEDY SPACE CENTER, FL 32899

Title: S () Delete
Name: WALTERS, TERRY
Address: 8505 PARROTS LANDING DRIVE
City-St-Zip: TAMPA, FL 33647

Title: CD () Delete
Name: SCHNEEBERGER, JOE A
Address: 2500 MAITLAND CENTER PARKWAY
City-St-Zip: MAITLAND, FL 32751

Title: C () Delete
Name: HERMAN, BRIAN
Address: 2500 MAITLAND CENTER PARKWAY
City-St-Zip: MAITLAND, FL 32751

Title: T () Delete
Name: WOLFSON, ED
Address: 5102 DARDEN AVENUE
City-St-Zip: ORLANDO, FL 328121105

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: HERMAN, BRIAN
Address: 201 S. ORANGE AVE.
City-St-Zip: ORLANDO, FL 32801

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

Title: S (X) Change () Addition
Name: GUYNN, MICHELE
Address: 2450 TIM GAMBLE PLACE
City-St-Zip: TALLAHASSEE, FL 32308

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

Title: C (X) Change () Addition
Name: BOUKATHER, KAREN
Address: 10210 HIGHLAND MANOR DR. SUITE 140
City-St-Zip: TAMPA, FL 33610

Title: T (X) Change () Addition
Name: WOLFSON, ED
Address: 315 E. ROBINSON STREET SUITE 400
City-St-Zip: ORLANDO, FL 32801

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: JOE SCHNEEBERGER

CD

01/15/2008

Electronic Signature of Signing Officer or Director

Date