2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2007
Secretary of State

DOCUMENT# N05000011132

Entity Name: SPACE COAST BLUES SOCIETY, INC.

Current Principal Place of Business:

2125 EASTWOOD DRIVE
MERRITT ISLAND, FL 32952

New Principal Place of Business:

Current Mailing Address:

PO BOX 320333
COCOA BEACH, FL 32932

New Mailing Address:

FEI Number: 54-2186882 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

SUNDIN, GLENN T LLM ATT
335 SOUTH PLUMOSA STREET
311 SIXTH AVE.
MERRITT ISLAND, FL 32952 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 (X) Delete
Name: BOLINGER, KIM
Address: 4105 CITRUS BLVD.
City-St-Zip: COCOA, FL 32926

Title: D (X) Delete
Name: CRAWFORD, CHUCK
Address: 4105 CITRUS BLVD.
City-St-Zip: COCOA, FL 32926

Title: D ( ) Delete
Name: JESSE, RIK
Address: 2125 EASTWOOD DR.
City-St-Zip: MERRITT ISLAND, FL 32952

Title: D ( ) Delete
Name: JESSE, VICKY
Address: 2125 EASTWOOD DR.
City-St-Zip: MERRITT ISLAND, FL 32952

Title: D ( ) Delete
Name: WILHELM, BONNIE
Address: 655 CARAMBOLA DRIVE
City-St-Zip: MERRITT ISLAND, FL 32952

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:

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: VICKY L. JESSE D 05/02/2007
Electronic Signature of Signing Officer or Director — Date