

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000011132

FILED  
Mar 09, 2008  
Secretary of State

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)

**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:**

SUNDIN, GLENN T LLM ATT  
335 SOUTH PLUMOSA STREET  
MERRITT ISLAND, FL 32952 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: GLENN T. SUNDIN

03/09/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

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:

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

03/09/2008

Electronic Signature of Signing Officer or Director

Date