2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2008
Secretary of State

DOCUMENT# N06000005235

Entity Name: WEST FLORIDA HOME EDUCATION MUSIC ASSOCIATION, INC.

Current Principal Place of Business:

2721 GULF BREEZE PARKWAY
GULF BREEZE, FL 32563

New Principal Place of Business:

Current Mailing Address:

2721 GULF BREEZE PARKWAY
GULF BREEZE, FL 32563

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BORDELON & SCHULTZ LAW FIRM, P.L.
2721 GULF BREEZE PARKWAY
GULF BREEZE, FL 32563 US

Name and Address of New Registered Agent:

KERRY ANNE SCHULTZ, ESQUIRE
2721 GULF BREEZE PARKWAY
GULF BREEZE, FL 32563 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: KERRY ANNE SCHULTZ, ESQUIRE 04/23/2008
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: DUNFORD, CHRISTOPHER
Address: 2721 GULF BREEZE PARKWAY
City-St-Zip: GULF BREEZE, FL 32563

Title: D ( ) Delete
Name: ELLENBERG, KAREN
Address: 2721 GULF BREEZE PARKWAY
City-St-Zip: GULF BREEZE, FL 32563

Title: D ( ) Delete
Name: HANSEN, ANN
Address: 2721 GULF BREEZE PARKWAY
City-St-Zip: GULF BREEZE, FL 32563

Title: D ( ) Delete
Name: JONES, GLENDA
Address: 2721 GULF BREEZE PARKWAY
City-St-Zip: GULF BREEZE, FL 32563

Title: D ( ) Delete
Name: WITTER, NATHAN
Address: 2721 GULF BREEZE PARKWAY
City-St-Zip: GULF BREEZE, FL 32563

Title: D ( ) Delete
Name: KELLEY, CHRISTOPHER
Address: 2721 GULF BREEZE PARKWAY
City-St-Zip: GULF BREEZE, FL 32563

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:

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: CHRISTOPHER DUNFORD D 04/23/2008
Electronic Signature of Signing Officer or Director Date