

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 07, 2008 8:00 am
Secretary of State

02-07-2008 90014 009 ****61.25

DOCUMENT # N06000007116

1. Entity Name
**INTERNATIONAL BROTHERHOOD OF MAGICIANS RING
258 LAKE COUNTY MAGIC ASSOCIATION INC.**



Principal Place of Business
**21152 ROYAL ST. GEORGE LANE
LEESBURG, FL 34748**

Mailing Address
**21152 ROYAL ST. GEORGE LANE
LEESBURG, FL 34748**

4001341



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

02022008 Chg-NP CR2E037 (12/06)

4. FEI Number
84-1659850

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MOODY, JAMES
21152 ROYAL ST. GEORGE LANE
LEESBURG, FL 34748**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**T
SMALLWOOD, GEORGE L
8141 LAKESIDE DRIVE
YALAH, FL 34797** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SMALLWOOD, GEORGE L. ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
KONSTAN, ALLAN
11218 PINE RIDGE ROAD
LEESBURG, FL 34788** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VICE PRESIDENT
JAN SUZ
P.O. BOX 1925
BUSHNELL, FLORIDA 33513** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
MOODY, JAMES
21152 ROYAL ST. GEORGES
LEESBURG, FL 34748** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PRESIDENT
MOODY JAMES
21152 ROYAL ST. GEORGES
LEESBURG, FLORIDA 34748** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
SCAVUZZO, WILLIAM
10832 LOG HOUSE ROAD
CLERMONT, FL 34711** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VP
REID, ROGER
531 HEATHER BRITE CIRCLE
APOPKA, FL 32712** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SECRETARY ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
HEWLETT, RICHARD
906 WEST CHURCH STREET
DELAND, FL 32720** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

George L. Smallwood

GEORGE L. SMALLWOOD 2/2/08 (352) 324 1151

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #