

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06559

FILED  
Apr 13, 2009  
Secretary of State

**Entity Name:** THE MIDNIGHT PASS SOCIETY, INC.

**Current Principal Place of Business:**

1706 SANDALWOOD DRIVE  
SARASOTA, FL 34231 US

**New Principal Place of Business:**

**Current Mailing Address:**

4343 SAWYER RD  
SARASOTA, FL 34233 US

**New Mailing Address:**

**FEI Number:** 59-2480486

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HERBERT, JAMES P  
1706 SANDALWOOD DR  
SARASOTA, FL 34231 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: MEUSER, STANLEY  
Address: 116 OSPREY POINT DRIVE  
City-St-Zip: OSPREY, FL 34229

Title: CD ( ) Delete  
Name: HERBERT, JIM  
Address: 1706 SANDALWOOD DR.  
City-St-Zip: SARASOTA, FL

Title: PD ( ) Delete  
Name: WAECHTER, ROBERT  
Address: 6539 PEACOCK RD  
City-St-Zip: SARASOTA, FL

Title: D ( ) Delete  
Name: TRIPP, ROBERT  
Address: 1602 STRICKNEY POINT RD #402  
City-St-Zip: SARASOTA, FL 34231

Title: D ( ) Delete  
Name: KERR, WANDA  
Address: 5221 OCEAN BLVD SUITE #2 BOX 277  
City-St-Zip: SARASOTA, FL 34242

Title: D (X) Delete  
Name: HOWELL, PHILIP  
Address: 1750 SOUTH POINTE DR  
City-St-Zip: SARASOTA, FL 34231

**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: ROBERT WAECHTER

PD

04/13/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date