2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000005341

Entity Name: FLORIDA CAST & CREW ASSOCIATION, INC.

FILED Jan 29, 2008 Secretary of State

Current Principal Place of Busi	ness: New	Principal Place of Bus	siness:
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764 MARYLAND AVE 3315 MAGGIE BLVD WINTER PARK, FL 32789 ORLANDO, FL 32811

Current Mailing Address: New Mailing Address:

764 MARYLAND AVE 3315 MAGGIE BLVD WINTER PARK, FL 32789 ORLANDO, FL 32811

FEI Number: 45-0563411 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

DUPONT, SCOTT

764 MARYLAND AVE

WINTER PARK, FL 32789 US

SOLDINGER, CRAIG
8183 TERRAGA CT
ORLANDO, FL 32836 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: CRAIG SOLDINGER 01/29/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition
Name: DUPONT, SCOTT Name: SOLDINGER, CRAIG

Address: 764 MARYLAND AVE Address: 764 MARYLAND AVE
City-St-Zip: WINTER PARK, FL 32789 City-St-Zip: WINTER PARK, FL 32789

Title: VP () Delete Title: VP (X) Change () Addition

 Name:
 GRUVER, MELISSA
 Name:
 PARNERS, STANLEY

 Address:
 139 W PARK STREET
 Address:
 3315 MAGGIE BLVD

 City-St-Zip:
 LAKE HELEN, FL 32744
 City-St-Zip:
 ORLANDO, FL 32811

Title: T () Delete Title: T (X) Change () Addition

 Name:
 KIDWELL, ANNIE
 Name:
 SMITH JR, ARTHUR

 Address:
 4808 MYRTLE BAY DRIVE
 Address:
 4378 SEA ROCK COURT

 City-St-Zip:
 ORLANDO, FL 32829
 City-St-Zip:
 APOPKA, FL 32712

 $\label{eq:title:Title:S} \textit{Title:} S \qquad \textit{() Change (X) Addition}$

 Name:
 Name:
 REECE, MARSHA

 Address:
 Address:
 1850 LONG POND DR

 City-St-Zip:
 City-St-Zip:
 LONGWOOD, FL 32779

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: MARSHA REECE S 01/29/2008