

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000007172

FILED
May 05, 2008
Secretary of State

Entity Name: THE UNOFFICIAL MICHAEL EASTON FAN CLUB INC.

Current Principal Place of Business:

390 BROWN CHAPEL RD.
SAINT CLOUD, FL 34769 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 700778
SAINT CLOUD, FL 34770 US

New Mailing Address:

FEI Number: 30-0431705 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

LEES-SCHAAL, CLAUDINE A
390 BROWN CHAPEL RD.
SAINT CLOUD, FL 34769 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LEES-SCHAAL, CLAUDINE A
Address: 390 BROWN CHAPEL RD.
City-St-Zip: SAINT CLOUD,, FL 34769 US

Title: VP () Delete
Name: WIGAND, SHANON M
Address: 6503 COTTAGE LANE
City-St-Zip: ST. CLOUD, FL 34771 US

Title: VP () Delete
Name: BORRIELLO, JEAN
Address: 4284 WELDON AVE.
City-St-Zip: SPRING HILL, FL 34609 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: AVILA, LORI A VP
Address: 233 S. WALKER AVENUE
City-St-Zip: SAN PEDRO, CA 90732 US

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: CLAUDINE ANNE LEES-SCHAAL

P

05/05/2008

Electronic Signature of Signing Officer or Director

Date