2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000010692

Entity Name: LEAGUE OF FLORIDA ORCHESTRAS INC.

FILED Apr 30, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business

316 SEA ISLAND WAY 1225 WEST BEAVER STREET TAMPA, FL 33602 SUITE 113

JACKSONVILLE, FL 32204

Current Mailing Address: New Mailing Address:

316 SEA ISLAND WAY

TAMPA, FL 33602

2326 ISLAND SHORE DRIVE S.
JACKSONVILLE, FL 32218

FEI Number: 32-0223174 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

UNITED STATES CORPORATION AGENTS, INC. 13302 WINDING OAKS BLVD SUITE A-100 TAMPA, FL 336123425 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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 STONE, LEONARD D
 Name:
 CUFF, RICHARD

 Address:
 316 SEA ISLAND WAY
 Address:
 2326 ISLAND SHORE DRIVE S.

 City-St-Zip:
 TAMPA, FL 33602
 City-St-Zip:
 JACKSONVILLE, FL 32218

Title: S () Delete Title: () Change () Addition

 Name:
 MCGLONE, KERRY
 Name:

 Address:
 812 E ROLLINS ST #300
 Address:

 City-St-Zip:
 ORLANDO, FL 32803
 City-St-Zip:

Name: HOPPER, ALAN Name: JONES, IRIS

Address: 300 W WATER STREET #200 Address: 1639 ATLANTIC BLVD
City-St-Zip: JACKSONVILLE, FL 32202 City-St-Zip: JACKSONVILLE, FL 32207

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: RICHARD CUFF P 04/30/2009