2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000005455

Entity Name: UMBRAGE MAGAZINE, INC.

FILED Apr 26, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

108 NOKOMIS AVE S #1 VENICE, FL 34285

Current Mailing Address: New Mailing Address:

108 NOKOMIS AVE S #1 VENICE, FL 34285

FEI Number: 26-2217342 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:

 SHORT, JOHN (JACK)
 SHORT, JOHN (JACK) J

 108 NOKOMIS AVE S #1
 108 NOKOMIS AVE S #1

 VENICE, FL 34285
 US

 VENICE, FL 34285
 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: JACK SHORT 04/26/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: Name: Address:	D () Delete SHORT, JOHN (JACK) 108 NOKOMIS AVE S #1	Title: Name: Address:	() Change () Addition
City-St-Zip:	VENICE, FL 34285	City-St-Zip:	
Title:	D () Delete	Title:	() Change () Addition
Name:	SHORT, BRIAN	Name:	
Address:	108 NOKOMIS AVE S #1	Address:	
City-St-Zip:	VENICE, FL 34285	City-St-Zip:	
Title:	D () Delete	Title:	() Change () Addition
Name:	GOGGANS, ASHTON	Name:	
Address:	144 SPENCER ST #501	Address:	
City-St-Zip:	BROOKLYN, NY 11205	City-St-Zip:	
Title:	D () Delete	Title:	D (X) Change () Addition
Name:	SCHWARTZ, EMILY	Name:	FRENCH, JASON
Address:	305 1/2 WEST VENICE AVE #6	Address:	88 ERSKINE AVENUE, UNIT 1214
City-St-Zip:	VENICE, FL 34285	City-St-Zip:	TORONTO, ON M4P 1Y3 CA
Title:	D () Delete	Title:	() Change () Addition
Name:	KOBYLECKA, MALGORZATA	Name:	
Address:	1004 EAST POWHATAN AVE	Address:	
City-St-Zip:	TAMPA, FL 33604	City-St-Zip:	
Title:	D () Delete	Title:	() Change () Addition
Name:	PRICE, CASEY	Name:	
Address:	2613 6TH ST UNIT F	Address:	
City-St-Zip:	SANTA MONICA, CA 90405	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: JACK SHORT D 04/26/2009