2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 01, 2008
Secretary of State

DOCUMENT# N13171

Entity Name: THE NATIONAL MACINTOSH COMPUTER SOCIETY, INC.

Current Principal Place of Business:

C/O BLUM 5434 GRAND PALM CIR.
DELRAY BEACH, FL 33484

New Principal Place of Business:

Current Mailing Address:

C/O BLUM 5434 GRAND PALM CIR.
DELRAY BEACH, FL 33484

New Mailing Address:

FEI Number: 65-0023987 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BLUM, PETER H
5434 GRAND PALM CIR.
DELRAY BEACH, FL 33484 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: PD ( ) Delete
Name: BLUM, H. PETER
Address: 5434 GRAND PALM CIRCLE
City-St-Zip: DELRAY BEACH, FL 33484

Title: VD ( ) Delete
Name: HOFFMANN, DEAN
Address: 1420 NW 62 AVE.
City-St-Zip: SUNRISE, FL 33313

Title: SD ( ) Delete
Name: KLEIN, BARBARA
Address: 3056 S OAKLAND FOREST DR #2305
City-St-Zip: FT LAUDERDALE, FL 33309

Title: TD ( ) Delete
Name: MAGGIED, JOANN
Address: 6230 SWANS TERRACE
City-St-Zip: COCONUT CREEK, FL 33073

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:

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: H. PETER BLUM PRES 04/01/2008
Electronic Signature of Signing Officer or Director — Date