

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16184

FILED  
Jan 04, 2008  
Secretary of State

Entity Name: SPACE COAST JAZZ SOCIETY, INC.

## Current Principal Place of Business:

260 HAMMOCK RD SE  
PALM BAY, FL 32909 US

## New Principal Place of Business:

## Current Mailing Address:

260 HAMMOCK RD SE  
PALM BAY, FL 32909 US

## New Mailing Address:

FEI Number: 59-2832534      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

MARTINEZ, RICHARD  
260 HAMMOCK RD SE  
PALM BAY, FL 32909 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: BLATT, JOEL G III  
Address: 5095 PINOT CT  
City-St-Zip: ROCKLEDGE, FL 32955

Title: ASD ( ) Delete  
Name: PURDY, SANDRA  
Address: 2593 HUDSON AVE  
City-St-Zip: MERRITT ISLAND, FL 32952

Title: TD ( ) Delete  
Name: MARTINEZ, RICHARD  
Address: 260 HAMMOCK RD SE  
City-St-Zip: PALM BAY, FL 32909

Title: SD ( ) Delete  
Name: AIKEN, PAT  
Address: 220 CHARLES CT  
City-St-Zip: SATELLITE BEACH, FL 32937

Title: APD (X) Delete  
Name: INGLIS, HELEN  
Address: 2660 STATE ST  
City-St-Zip: MELBOURNE, FL 32904

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: GREENBLATT, JOEL III  
Address: 5095 PINOT CT  
City-St-Zip: VIERA, FL 32955

Title: ASD (X) Change ( ) Addition  
Name: INGLIS, HELEN  
Address: 2660 STATE ST  
City-St-Zip: WEST MELBOURNE, FL 32904

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: RICHARD MARTINEZ

TD

01/04/2008

Electronic Signature of Signing Officer or Director

Date