

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N34984

FILED
Jan 31, 2008
Secretary of State

Entity Name: THE RECYCLES ORCHESTRA, INC.

Current Principal Place of Business:

KEN KINGSWORTH
1604 REBECCA CT
JACKSONVILLE, FL 32259

New Principal Place of Business:

Current Mailing Address:

KEN KINGSWORTH
1604 REBECCA CT
JACKSONVILLE, FL 32259

New Mailing Address:

FEI Number: 59-2979710

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KINGSWORTH, KEN
1604 REBECCA CT
JACKSONVILLE, FL 32259 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: DVP () Delete
Name: SIMPKINS, GORDON
Address: 17305 EAGLE BEND BLVD
City-St-Zip: JACKSONVILLE, FL 32226

Title: DT () Delete
Name: HALL, ART
Address: 2119 WINTERBOURNE W
City-St-Zip: ORANGE PARK FL, FL 32073

Title: DP () Delete
Name: DYNAN, JIM
Address: 2156 MYRTLE LN
City-St-Zip: ORANGE PARK, FL 32073

Title: D () Delete
Name: MCMARLIN, SUSAN
Address: 91 SEA WINDS LN EAST
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: DS () Delete
Name: JANES, JEANEN
Address: 4438 BREAKWATER ROW WEST
City-St-Zip: JACKSONVILLE, FL 32225

Title: D () Delete
Name: DAVIS, GORDON
Address: 1035 LEGAY
City-St-Zip: JACKSONVILLE, FL 32205

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:

Title: S (X) Change () Addition
Name: JANES, JEANEN
Address: 4438 BREAKWATER ROW WEST
City-St-Zip: JACKSONVILLE, FL 32225

Title: D (X) Change () Addition
Name: MCGROSKY, MENA
Address: 33148 COTTAGE CREEK LN
City-St-Zip: BRYCEVILLE, FL 32009

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: A. L. HALL

DT

01/31/2008

Electronic Signature of Signing Officer or Director

Date