

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000004286

FILED
Feb 18, 2009
Secretary of State

Entity Name: FIRST COAST WIND ENSEMBLE, INC.

Current Principal Place of Business:

3842 MUSKET TRAIL
JACKSONVILLE, FL 32277

New Principal Place of Business:

Current Mailing Address:

3842 MUSKET TRAIL
JACKSONVILLE, FL 32277

New Mailing Address:

FEI Number: 59-3301510 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOORE, ROBERT
150 AMHERST PLACE
PONTE VERDA, FL 32081 US

Name and Address of New Registered Agent:

MOORE, ROBERTA
150 AMHERST PLACE
PONTE VERDA, FL 32081 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: ROBERTA MOORE

02/18/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: S () Delete
Name: BADGER, JULIE
Address: 6461 WHITIE BLOSSOM CIRCLE
City-St-Zip: JACKSONVILLE, FL 32258

Title: D () Delete
Name: SHUGART, LARRY
Address: 2153 SE HAWTHORNE RD SUITE 128
City-St-Zip: GAINESVILLE, FL 32641

Title: TD () Delete
Name: ROBERTA, MOORE
Address: 150 AMHERST PLACE
City-St-Zip: PONTE VEDRA, FL 32081

Title: D () Delete
Name: MAY, SUSAN
Address: 5925 MORSE AVE
City-St-Zip: JACKSONVILLE, FL 32244

Title: D () Delete
Name: BOONE, STEVE
Address: 2305 RANGE CRESCENT CT
City-St-Zip: ORANGE PARK, FL 32073

Title: D () Delete
Name: BOYLES, GLENN
Address: 4040 WOODCOCK DRIVE SUITE 108
City-St-Zip: JACKSONVILLE, FL 32207

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: D (X) Change () Addition
Name: PAJE, VLADIMIR
Address: 7760 ANDES DRIVE
City-St-Zip: JACKSONVILLE, FL 32244 DU

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: ROBERTA MOORE

TREA

02/18/2009

Electronic Signature of Signing Officer or Director

Date