2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 05, 2009
Secretary of State

DOCUMENT# N95000002048

Entity Name: CENTRAL FLORIDA MUSICIANS' ASSOCIATION, LOCAL 389, INC.

Current Principal Place of Business:

3020 EAST ROBINSON STREET
ORLANDO, FL 32803 US

New Principal Place of Business:

Current Mailing Address:

3020 EAST ROBINSON STREET
ORLANDO, FL 32803 US

New Mailing Address:

FEI Number: 59-0752934 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

AVILA, MICHAEL P
3020 E ROBINSON STREET
ORLANDO, FL 32803 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: PSD ( ) Delete
Name: AVILA, MICHAEL P
Address: 3020 EAST ROBINSON STREET
City-St-Zip: ORLANDO, FL 32803

Title: TD ( ) Delete
Name: ZAMBITO, SAM
Address: P.O. BOX 261
City-St-Zip: GOTHA, FL 34734

Title: D ( ) Delete
Name: JORDAN, DANIEL
Address: 919 ARLINGTON BLVD
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: D ( ) Delete
Name: SMITH, BARRY
Address: 3020 EAST ROBINSON STREET
City-St-Zip: ORLANDO, FL 32803

Title: VPD ( ) Delete
Name: DANSBY-WELLS, DEBORAH
Address: 3020 EAST ROBINSON STREET
City-St-Zip: ORLANDO, FL 32803

Title: D ( ) Delete
Name: CROCKFORD, NANCY
Address: 1515 FALCON CT.
City-St-Zip: ORLANDO, FL 32803

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change ( ) Addition
Name: BRENDA, HIGGINS
Address: 209 HAZARD ST
City-St-Zip: ORLANDO, FL 32804

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: SAM ZAMBITO TD 01/05/2009

Electronic Signature of Signing Officer or Director — Date