

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Feb 06, 2009
Secretary of State**

DOCUMENT# N95000003277

Entity Name: HERNANDO JAZZ SOCIETY, INC.

Current Principal Place of Business:

11186 SPRING HILL DR
PMB 116
SPRING HILL, FL 34609

New Principal Place of Business:

Current Mailing Address:

11186 SPRING HILL DR
PMB 116
SPRING HILL, FL 34609

New Mailing Address:

FEI Number: 59-3323789 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LAWRENCE, EDGAR
299 QUANE AVE.
SPRING HILL, FL 34609 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: D () Delete
Name: DELLA MAGGIORE, NELSON
Address: 5035 HARBINGER RD
City-St-Zip: SPRING HILL, FL 34608

Title: D () Delete
Name: RAHOCHIK, ANDREW
Address: 6334 OCEAN PINE LN
City-St-Zip: SPRING HILL, FL 34606

Title: VPD () Delete
Name: PENA, RAUL
Address: 9418 CENTURY DR.
City-St-Zip: SPRING HILL, FL 34608

Title: TD () Delete
Name: DOMICK, FRANK
Address: 10348 SANDTRAP DR
City-St-Zip: SPRING HILL, FL 34608

Title: D () Delete
Name: MAMO, JOE
Address: 1302 HENRY AVE
City-St-Zip: SPRING HILL, FL 34608

Title: PD () Delete
Name: LAWRENCE, EDGAR
Address: 299 QUANE AVE.
City-St-Zip: SPRING HILL, FL 34609

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
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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: FRANK DOMICK

TD

02/06/2009

Electronic Signature of Signing Officer or Director

Date