2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000001659

Entity Name: HAYDN SOCIETY OF FLORIDA INC.

FILED May 09, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

732 NW 29 STREET WILTON MANORS, FL 33311

Current Mailing Address: New Mailing Address:

732 NW 29 STREET 732 NW 29 STREET

WILTON MANORS, FL 33311 US WILTON MANORS, FL 33311

FEI Number: 65-0826995 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SIGURDSON, WENDY R REYNOLDS, WENDY 732 NW 29 STREET 732 NW 29 STREET

WILTON MANORS, FL 33311 US WILTON MANORS, FL 33311 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: WENDY REYNOLDS 05/09/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CD () Delete Title: () Change () Addition

Name: BERG, ROBIN Name:
Address: 4500 SEA GRAPE DRIVE Address:
City of Tip: 1 AUDERDALE BY THE SEA EL 22209 City of Tip:

City-St-Zip: LAUDERDALE-BY-THE-SEA, FL 33308 City-St-Zip:

Title: D () Delete Title: D (X) Change () Addition Name: ZENIL, MARIA Name: FIORAVANTE, BIRGIT

 Name:
 ZENIL, MARIA
 Name:
 FIORAVANTE, BIRGIT

 Address:
 313 NE 2 AVENUE
 Address:
 8315 SE 12TH COURT

 City-St-Zip:
 FORT LAUDERDALE, FL 33301
 City-St-Zip:
 OCALA, FL 34480

Title: D () Delete Title: () Change () Addition

 Name:
 ALTMAN, HARRIETTE
 Name:

 Address:
 4930 SABAL PALM BLVD #401
 Address:

 City-St-Zip:
 TAMARAC, FL 33319
 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: BIRGIT FIORAVANTE D 05/09/2008