

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000000490

FILED
Jul 10, 2008
Secretary of State

Entity Name: FLORIDA MAGICIANS ASSOCIATION, INC.

Current Principal Place of Business:

C/O MARK A. WROBLEWSKI
3470 LAKE PADGETT DRIVE
LAND O LAKES, FL 34639

New Principal Place of Business:

C/O ROBERT M. SCHVEY
2938 SANDY BRANCH LANE
JACKSONVILLE, FL 32257

Current Mailing Address:

C/O MARK A. WROBLEWSKI
3470 LAKE PADGETT DRIVE
LAND O LAKES, FL 34639

New Mailing Address:

C/O ROBERT M. SCHVEY
2938 SANDY BRANCH LANE
JACKSONVILLE, FL 32257

FEI Number: 94-1687665 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:

WROBLEWSKI, MARK A
3470 LAKE PADGETT DRIVE
LAND O LAKES, FL 34639 US

Name and Address of New Registered Agent:

SCHVEY, ROBERT M
2938 SANDY BRANCH LANE
JACKSONVILLE, FL 32257 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: ROBERT M. SCHVEY

07/10/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: WROBLEWSKI, MARK A
Address: 3470 LAKE PADGETT DRIVE
City-St-Zip: LAND O LAKES, FL 34639

Title: D () Delete
Name: DEL VECCHIO, RICHARD
Address: 8961 SW 150TH
City-St-Zip: MIAMI, FL 33196

Title: VP () Delete
Name: PRESTON, PAUL
Address: 7337 AMHURST LANE
City-St-Zip: CLEARWATER, FL 33764

Title: S/T (X) Delete
Name: WROBLEWSKI, MARY M
Address: 3470 LAKE PADGETT DRIVE
City-St-Zip: LAND O LAKES, FL 34639

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: STAPLETON, DAN
Address: 8237 BANYAN BLVD.
City-St-Zip: ORLANDO, FL 32819

Title: VP (X) Change () Addition
Name: COOK, IRVING
Address: 136 SOUTH BEACH STREET
City-St-Zip: DAYTONA BEACH, FL 32114

Title: S/T (X) Change () Addition
Name: SCHVEY, ROBERT M
Address: 2938 SANDY BRANCH LANE
City-St-Zip: JACKSONVILLE, FL 32257

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: ROBERT M. SCHVEY

SECY

07/10/2008

Electronic Signature of Signing Officer or Director

Date