FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR 12 AM 12:23

DOCUMENT # **729504** **(1)**

1. Corporation Name

FOUNDATION FOR PROMOTION OF MUSIC, INC.

Principal Place of Business	Mailing Address
% HAYWOOD C. SMITH, JR. 3917 N.W. 31ST PL. GAINESVILLE FL 32606	% HAYWOOD C. SMITH, JR. 3917 N.W. 31ST PL. GAINESVILLE FL 32606

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 04/26/1974
3a. Date of Last Report: 04/27/1994
4. FEI Number: 59-1625322 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☑ **$68.75** Supplemental Fee Not Required
8. *This corporation has liability for intangible tax under S. 199.032,* Florida Statutes ☐ Yes ☑ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip / Country 24 / 25	Zip / Country 29 / 30

9. Name and Address of Current Registered Agent

SMITH, HAYWOOD C JR
3917 NW 31ST ST.
GAINESVILLE FL 32606

10. Name and Address of New Registered Agent

61 Name
62 Street Address (P.O. Box Number is Not Acceptable)
63
64 City **FL** 65 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Haywood C. Smith, jr. 4/8/95
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P	11 TITLE		☑ Change ☐ Addition
NAME	SEAGER, LORIANE	12 NAME	SEAGER, LAURAINE	(CORRECTION)
STREET ADDRESS	1830 NW 51ST TERR.	13 STREET ADDRESS		
CITY-ST-ZIP	GAINESVILLE FL	14 CITY-ST-ZIP		32605
TITLE	VD	21 TITLE		☐ Change ☑ Addition
NAME	KING, JAMES	22 NAME		
STREET ADDRESS	RT 4, BOX 105 B	23 STREET ADDRESS		
CITY-ST-ZIP	ALACHUA FL	24 CITY-ST-ZIP		32615
TITLE	V	31 TITLE		☐ Change ☑ Addition
NAME	KEIG, BETTY	32 NAME		
STREET ADDRESS	8825 NW 4TH PLACE	33 STREET ADDRESS		
CITY-ST-ZIP	GAINESVILLE FL	34 CITY-ST-ZIP		32607
TITLE	S	41 TITLE		☐ Change ☐ Addition
NAME	PRING, BETTE	42 NAME		
STREET ADDRESS	8329 SW 3RD PLACE	43 STREET ADDRESS		
CITY-ST-ZIP	GAINESVILLE FL	44 CITY-ST-ZIP		
TITLE	T	51 TITLE		☐ Change ☑ Addition
NAME	SMITH, HAYWOOD	52 NAME		
STREET ADDRESS	3917 NW 31ST PLACE	53 STREET ADDRESS		
CITY-ST-ZIP	GAINESVILLE FL	54 CITY-ST-ZIP		32606
TITLE	D	61 TITLE		☐ Change ☐ Addition
NAME	AMOTT, JOHN	62 NAME		
STREET ADDRESS	4232 SW 94TH DR.	63 STREET ADDRESS		
CITY-ST-ZIP	GAINESVILLE FL	64 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Haywood C. Smith, jr. TREASURER, F.P.M. 4/8/95 (904) 392-3744
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR / Title / Date / Daytime Phone #

0020845