

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F26009

Entity Name: FOGT'S MUSIC, INC.

FILED  
Apr 19, 2010  
Secretary of State

**Current Principal Place of Business:**

4209 S. TAMIAMI TR.  
SARASOTA, FL 342313627 US

**New Principal Place of Business:**

**Current Mailing Address:**

4209 S. TAMIAMI TR.  
SARASOTA, FL 342313627 US

**New Mailing Address:**

4209 S. TAMIAMI TR.  
SARASOTA, FL 342313627 US

FEI Number: 59-2080791

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FOGT, REXANNE  
4209 S TAMIAMI TR  
SARASOTA, FL 34321 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: PD  
Name: FOGT, REXANNE G  
Address: 4209 S. TAMIAMI TR.  
City-St-Zip: SARASOTA, FL 34231

Title: STD  
Name: FOGT, LAMONT D  
Address: 4209 S. TAMIAMI TR.  
City-St-Zip: SARASOTA, FL 34231

Title: D  
Name: ALDERFER, JULIE FOGT  
Address: 4209 S. TAMIAMI TR.  
City-St-Zip: SARASOTA, FL 34231

Title: D  
Name: SCHMANDT, MARLA F  
Address: 4209 S. TAMIAMI TR.  
City-St-Zip: SARASOTA, FL 34231

I hereby 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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: REXANNE FOGT

PD

04/19/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date