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NONPROFIT  
CORPORATION  
ANNUAL REPORT

1996



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

DOCUMENT # N42601

(7)

1. Corporation Name

MUSIC ORLANDO, INC.

Principal Place of Business

1111 N. ORANGE AVE.  
ORLANDO FL 32804  
US

Mailing Address

C/O SUELLEN FAGIN  
1016 DELANEY PARK DRIVE  
ORLANDO FL 32806

2. Principal Place of Business

2a. Mailing Address

21 500 N. Orlando Avenue  
Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Winter Park, FL 32789

28 City & State

24 Zip

25 Country

29 Zip

30 Country

32789

Orange

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FAGIN, SUELLEN  
1016 DELANEY PARK DRIVE  
ORLANDO FL 32806

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE

NAME FAGIN, SUELLEN D  
STREET ADDRESS 1016 DELANEY PK DR  
CITY - ST - ZIP ORLANDO FL

TITLE VD ☒ DELETE

NAME MCINTYRE, LISA A  
STREET ADDRESS 4611 CASON COVE DR  
CITY - ST - ZIP ORLANDO FL

TITLE STD ☐ DELETE

NAME CURRAN, SUSAN  
STREET ADDRESS 2338 C S CONWAY RD  
CITY - ST - ZIP ORLANDO FL

TITLE D ☐ DELETE

NAME BRODIE, LYMAN  
STREET ADDRESS 2993 CEDAR GLEN PL  
CITY - ST - ZIP OVIEDO FL

TITLE D ☒ DELETE

NAME BROMBERG, PETER A  
STREET ADDRESS 110 SPRINGSODE CT  
CITY - ST - ZIP LONGWOOD FL

TITLE D ☐ DELETE

NAME VAN BRUNT, LAURIE  
STREET ADDRESS 5239 STONE HARBOUR RD  
CITY - ST - ZIP ORLANDO FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D ☐ Change ☒ Addition

1.2 NAME David Glerum  
1.3 STREET ADDRESS 6716 Woodlake Drive  
1.4 CITY - ST - ZIP Orlando, FL 32810

2.1 TITLE D ☐ Change ☒ Addition

2.2 NAME Kimberly Brooks  
2.3 STREET ADDRESS 919 N. Orange Ave.  
2.4 CITY - ST - ZIP Winter Park, FL 32789

3.1 TITLE D ☐ Change ☒ Addition

3.2 NAME Alice Fague  
3.3 STREET ADDRESS 418 Rahn Street  
3.4 CITY - ST - ZIP Orlando, FL 32806

4.1 TITLE D ☐ Change ☒ Addition

4.2 NAME Carol Fenner  
4.3 STREET ADDRESS 1185 Washington Avenue  
4.4 CITY - ST - ZIP Winter Park, FL 32789

5.1 TITLE D ☐ Change ☒ Addition

5.2 NAME Richard Cato  
5.3 STREET ADDRESS 1120 Park Lake St.  
5.4 CITY - ST - ZIP Orlando, FL 32803

6.1 TITLE D ☐ Change ☒ Addition

6.2 NAME David Patrick  
6.3 STREET ADDRESS 941 Hyer Avenue  
6.4 CITY - ST - ZIP Orlando, FL 32804

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)(k), 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: SuelLEN D. Fagin  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

January 17, 1996 (407) 647-8525  
Date Daytime Phone #

APPROVED  
FOR  
FILING

RECEIVED - JAN 18 1996

FLORIDA DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA



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