


# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 27, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # N94000000761</b>					
1. Entity Name <b>MARINE CORPS MUSICIANS ASSOCIATION INCORPORATED</b>					
Principal Place of Business <b>4 HARTWICK COURT. CONROE TX 77304</b>			Mailing Address <b>4 HARTWICK COURT. CONROE TX 77304</b>		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		4. FEI Number <b>59-1595030</b>	
				Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent  <b>YOUNG, ALBERT G 2917 WILDERNESS BLVD W. PARRISH FL 34219</b>				7. Name and Address of New Registered Agent	
				Name	
				Street Address (P.O. Box Number is Not Acceptable)	
				City	
				<b>FL</b> Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reconstituting) DATE _____					
<b>FILE NOW: FEE IS \$61.25 Due By May 1, 2006</b>			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00</b> May Be Added to Fees
<b>Make Check Payable to Florida Department of State</b>					
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	PDT	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Add:
NAME	PRIEST, RAY		NAME		
STREET ADDRESS	4 HARTWICK CT.		STREET ADDRESS		
CITY-ST-ZIP	CONROE TX 77304		CITY-ST-ZIP		
TITLE	VDT	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Add:
NAME	MELIKIAN, RICHARD		NAME		
STREET ADDRESS	21 BARTON ST.		STREET ADDRESS		
CITY-ST-ZIP	SPRINGFIELD MA 01104		CITY-ST-ZIP		
TITLE	TDT	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Add:
NAME	RICE, JAY		NAME		
STREET ADDRESS	301 CALLE FELICIDAD		STREET ADDRESS		
CITY-ST-ZIP	SAN CLEMENTE CA 92672-2204		CITY-ST-ZIP		
TITLE	DMT	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Add:
NAME	OLDENBURG, RICHARD		NAME		
STREET ADDRESS	25101 BEAR VALLEY RD.		STREET ADDRESS		
CITY-ST-ZIP	TEHACHAPI CA 93561-8311		CITY-ST-ZIP		
TITLE	SDT	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Add:
NAME	STANDRIDGE, GLENN D		NAME		
STREET ADDRESS	3160 COIN STREET		STREET ADDRESS		
CITY-ST-ZIP	BURTON MI 48519		CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Add:
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		



1st MOORE CR2E037 (10/05)

4. FEI Number **59-1595030**

5. Certificate of Status Desired  \$8.75 Additional Fee Required

7. Name and Address of New Registered Agent  
 Name \_\_\_\_\_  
 Street Address (P.O. Box Number is Not Acceptable) \_\_\_\_\_  
 City \_\_\_\_\_ **FL** Zip Code \_\_\_\_\_

9. Election Campaign Financing Trust Fund Contribution.  \$5.00 May Be Added to Fees

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  
 Change  Add:  
**1103000447742**  
**03/08/06-80067-018 61.25**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_