

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000103142

FILED
May 15, 2008
Secretary of State

Entity Name: AFTR MUSIC, INC.

Current Principal Place of Business:

8429 STARWAN RD S
JACKSONVILLE, FL 32211

New Principal Place of Business:

Current Mailing Address:

8429 STARWAN RD S
JACKSONVILLE, FL 32211

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WEDENFELLER, JASON R
8429 STARWAN RD S
JACKSONVILLE, FL 32211 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WEDENFELLER, JASON R
Address: 8429 STARWAN RD S
City-St-Zip: JACKSONVILLE, FL 32211

Title: VP () Delete
Name: HUTTO, MATTHEW S
Address: 8429 STARWAN RD S
City-St-Zip: JACKSONVILLE, FL 32211

Title: CEO () Delete
Name: WHITE, PETER M
Address: 8429 STARWAN RD S
City-St-Zip: JACKSONVILLE, FL 32211

Title: T () Delete
Name: MULLIS, BENJAMIN A
Address: 8429 STARWAN RD S
City-St-Zip: JACKSONVILLE, FL 32211

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: CATON, TREVOR
Address: 8429 STARWAN RD S
City-St-Zip: JACKSONVILLE, FL 32211

Title: CFO () Change (X) Addition
Name: MEADOWS, DANIEL
Address: 8429 STARWAN RD S
City-St-Zip: JACKSONVILLE, FL 32211

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

SIGNATURE: JASON WEDENFELLER

PRE

05/15/2008

Electronic Signature of Signing Officer or Director

_____ Date