FILE NOW: FILING FEE AFTER MAY 1 IS \$550 DO

PROFIT CORPORATION ANNUAL REPORT 1997

Principal Place of Business

3427 WEST UNIVERSITY AVENUE



FLORIDA DEPARTMENT STATE

Sandra B. Mort

Secretary of St DIVISION OF CORPO **b**Ns

DOCUMENT # 180812

LIPHAM MUSIC CO., INC.

(0)

3427 WEST UNIVERSITY AVENUE

Mailing Address

FILED Jan 28 1997 8:00am Secretary of State



2. Principal Place of Business 2. Mailing Address 2. Mailing Address 3. Date Incorporated or Qualified Q2/05/1996 2. Principal Place of Business 2. Mailing Address 3. Date Incorporated or Qualified Q2/05/1996 4. FEI Number Sp-0731865 5. Vertificate of Status Desired Sp-0731865 5. Certificate of Status Desired Sp-0731865 5. Certificate of Status Desired Sp-0731865 5. Certificate of Status Desired Sp-0731865 6. Election Campaign Financing Toust Fund Contribution Added to Fees Required 2. Principal Place of Status Desired Sp-0731865 7. Principal Place of Status Desired Sp-0731865 7. Country Sp-0731865 7. Certificate of Status Desired Sp-0731865 8. This corporation has liability for interfibile lax under s. 199.032, Florida Statutes Willy fees No North Place Sp-0731865 8. This corporation has liability for interfibile lax under s. 199.032, Florida Statutes Willy fees No North Place Sp-0731865 8. This corporation has liability for interfibile lax under s. 199.032, Florida Statutes Willy fees North Place Sp-0731865 8. This corporation has liability for interfibile lax under s. 199.032, Florida Statutes Willy fees North Place Sp-0731865 8. This corporation has liability for interfibile lax under s. 199.032, Florida Statutes Willy fees North Place Sp-0731865 8. This corporation has liability for interfibile lax under s. 199.032, Florida Statutes Willy fees North Place Sp-0731865 8. This corporation has liability for interfibile lax under s. 199.032, Florida Statutes Willy fees North Place Sp-0731865 8. This corporation has liability for interfibile lax under s. 199.032, Florida Statutes Willy fees North Place Sp-0731865 8. This corporation has liability for interfibile lax under s. 199.032, Florida Statutes Willy fees North Place Sp-0731865 8. This corporation has liability for interfibile lax under s. 199.032, Florida Statutes Willy fees North Place Sp-0731865 8. This corporation has liability for interfibile lax under s. 199.032, Florida Statutes Willy fees North Place Sp-073186, Florida Statutes William Fees Require	GAINESVILLE FL 32607 US		GAINESVILLE FL 32807-2402						
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Suite Apt: # etc: Suite Apt: # etc: Suite, Apt. #, etc. Sui	2. Principa P	tace of Business	2a. Mailing Address					A	pplied For
22 City & State City & State 28 Country Zip Country Zip 29 30 Florida Statutes 10. Name and Address of Current Registered Agent LIPHAM, T. H. 3736 S.W. 2ND PLACE GAINESVILLE FL 32807 84 City City City City Street Address (P.O. Box Number is Not Acceptable) 85 Zip Code 11. Pursuant to the provisions of Sections 607,0502 and 607,1508. Florida Statutes, the bove-named corporation submits this statement for the purpose of changing its registered agent and familiar with and accept the obligations of, Section 607,0505, Florida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 11. Pursuant to the provisions of Sections 607,0502 and 607,1508. Florida Statutes, the corporation's board of directors. I hereby accept the appointment as registered agent and familiar with and accept the obligations of, Section 607,0505, Florida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 NAME LIPHAM, CHERYL 3736 SW 2ND PLACE GAINESVILLE, FL. 00000 14 City-St-Zip GAINESVILLE, FL. 00000 14 City-St-Zip Country Country S. Country 8. This corporation has liability for insprigible tax unders s. 199.032, Florida Statutes 10. Name and Address of New Registered Agent 10. Name and Address of New Registered 10. Name and Address of N						59-0731365			
Trust Fund Contribution Added to Fees Z/p		# etc.	27			5. Certificate of Status Desired			
25 29 30 Florida Statutes Yes Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 11. PHAM, T. H. 3738 S.W. 2ND PLACE GAINESVILLE FL 32607 82 Street Address (P.O. Box Number is Not Acceptable) 83 City FL 85 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 agent are familiar with and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 THE VST LIPHAM, CHERYL SIREET ADDRESS 3738 SW 2ND PLACE GAINESVILLE, FL 00000 14. GITY-ST-ZIP THE P		e .	<u>├</u> ¬			· · · · · · · · · · · · · · · · · · ·			
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3736 S.W. 2ND PLACE GAINESVILLE FL 32607 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 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 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 if are familiar with and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature hyperory police have of registered agent and to all applicable invote. Registered Agent signature required when reinstating) OATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE VST DELETE I.1 TITLE Change Addition 1.2 NAME SIREET ADDRESS GTIY-SI-ZIP GAINESVILLE, FL 00000 1.4 CITY-ST-ZIP TITLE Change Addition Change Addition Change Addition		9. Name and Address of Curren	t Registered Agent			10. Name and Address of New Re	gistered /	\gent	
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## City ## Cit				82	Street Addr	ess (P.O. Box Number is Not Acceptate	ole)		
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 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 arm familiar with and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature type-out related rate of registered agent and tice if applicable in NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS IN 12 TITLE VST LIPHAM, CHERYL SIREEL ADDRESS 3736 SW 2ND PLACE CITY-SI-ZIP GAINESVILLE, FL 00000 DELETE 1.1 TITLE Change Addition Change		INCOVICEE I E OEGO!		83					
11. Pursuant to the provisions of Sections 697,0502 and 607,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its 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 arm familiar with and accept the obligations of, Section 607,0505, Florida Statutes. SIGNATURE Signature type-port solded have of registered agent and ticleif applicable. INOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS IN 12 TITLE V\$T LIPHAM, CHERYL SIRSEL ADDRESS 3736 \$W 2ND PLACE GAINESVILLE, FL 00000 14 CITY-ST-ZIP TITLE P Change Additio				84	City		FI	85 Zip) Code
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14. I do hereby certify that the information supplied with this filing 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 607, Florida Statutes; and that my name