

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # 188692 (8)

1. Corporation Name
KELLER MUSIC COMPANY



Principal Place of Business: 1506 N. ORANGE BLOSSOM TRAIL ORLANDO FL 32804-6103
Mailing Address: 1506 N. ORANGE BLOSSOM TRAIL ORLANDO FL 32804-6103

2. Principal Place of Business: 21 State, Apt. #, etc.; 22 City & State; 23 Zip; 24 Country
2a. Mailing Address: 26 State, Apt. #, etc.; 27 City & State; 28 Zip; 29 Country

3. Date Incorporated or Qualified: 10/01/1955
3a. Date of Last Report: 01/13/1995
4. FEI Number: 59-0762430
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MARTIN ROY KELLER
513 BARCLAY AVE.
ALTAMONTE SPRINGS FL 32701

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code
FL

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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 607.0505, Florida Statutes.

SIGNATURE: _____ DATE: _____

12. OFFICERS AND DIRECTORS

12.1 TITLE	PD	<input type="checkbox"/> DELETE
12.2 NAME	KELLER, ALICE C	
12.3 STREET ADDRESS	724 ENSENDA DR	
12.4 CITY-STATE-ZIP	ORLANDO FL	
12.5 TITLE	VS	<input type="checkbox"/> DELETE
12.6 NAME	KELLER, HOLLY E	
12.7 STREET ADDRESS	12310 KIRBY SMITH RD.	
12.8 CITY-STATE-ZIP	ORLANDO FL	
12.9 TITLE	VT	<input type="checkbox"/> DELETE
12.10 NAME	KELLER, MARTIN R	
12.11 STREET ADDRESS	513 BARCLAY AVE.	
12.12 CITY-STATE-ZIP	ALTAMONTE SPRINGS FL	
12.13 TITLE		<input type="checkbox"/> DELETE
12.14 NAME		
12.15 STREET ADDRESS		
12.16 CITY-STATE-ZIP		
12.17 TITLE		<input type="checkbox"/> DELETE
12.18 NAME		
12.19 STREET ADDRESS		
12.20 CITY-STATE-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.2 NAME		
13.3 STREET ADDRESS		
13.4 CITY-STATE-ZIP		
13.5 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.6 NAME		
13.7 STREET ADDRESS		
13.8 CITY-STATE-ZIP		
13.9 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.10 NAME		
13.11 STREET ADDRESS		
13.12 CITY-STATE-ZIP		
13.13 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.14 NAME		
13.15 STREET ADDRESS		
13.16 CITY-STATE-ZIP		

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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Martin R Keller* DATE: 2/1/96
SIGNATURE AND TYPE (OR PRINTED NAME) OF SIGNING OFFICER OR DIRECTOR (Do not print name)

CR2E034 (12/95)