

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 18, 2005 8:00 am**  
**Secretary of State**

03-18-2005 90048 043 \*\*\*150.00

**DOCUMENT # 238125**

1. Entity Name  
**STARLING MUSIC COMPANY, INC.**



Principal Place of Business

**1735 MERCERS FERNERY ROAD**  
**DELAND, FL 32720 0**

Mailing Address

**1735 MERCERS FERNERY ROAD**  
**DELAND, FL 32720 0**

2. Principal Place of Business

**2841 Shenandoah Road**  
Suite, Apt. #, etc.

3. Mailing Address

**2841 Shenandoah Road**  
Suite, Apt. #, etc.



03142005 Chg-P CR2E034 (10/03)

City & State

Zip

Country

City & State

Zip

Country

4. FEI Number

**59-0901939**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**STARLING, KAREN R**  
**1735 MERCERS FERNERY ROAD**  
**DELAND, FL 32720**

7. Name and Address of New Registered Agent

Name

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

**2841 Shenandoah Road**

City

**FL**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE **PST** ☐ Delete  
NAME **STARLING KAREN R**  
STREET ADDRESS **1735 MERCERS FERNERY ROAD**  
CITY-ST-ZIP **DELAND, FL 32720**

TITLE **AS** ☐ Delete  
NAME **STARLING, TREVOR R**  
STREET ADDRESS **1735 MERCERS FERNERY ROAD**  
CITY-ST-ZIP **DELAND, FL 32720**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS **2841 Shenandoah Road**  
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS **2223 Lake Ruby Rd**  
CITY-ST-ZIP **DeLand, FL 32724**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I 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 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 607, 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: **Karen R. Starling**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**3/15/05**  
Date

**386 736 0802**  
Daytime Phone #

**Karen R. Starling**