

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 282224

FILED
Jan 18, 2004
Secretary of State

Entity Name: COLEMAN'S MUSIC CO. INC.

Current Principal Place of Business:

1015 HAINES ST
JACKSONVILLE, FL 32206

New Principal Place of Business:

Current Mailing Address:

1015 HAINES ST
JACKSONVILLE, FL 32206

New Mailing Address:

FEI Number: 59-1291267

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COLEMAN, GARY B
1370 MOSS CREEK DRIVE
JACKSONVILLE, FL 32225 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: COLEMAN, GARY B.,
Address: 1015 HAINES ST
City-St-Zip: JACKSONVILLE, FL 32206

Title: VSTD () Delete
Name: COLEMAN, CLARK,
Address: 1015 HAINES ST
City-St-Zip: JACKSONVILLE, FL 32201

Title: STD () Delete
Name: COLEMAN, GARY B., JR.,
Address: 9020 BERRY AVE
City-St-Zip: JACKSONVILLE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VSTD (X) Change () Addition
Name: COLEMAN, GARY B., JR.,
Address: 1015 HAINES ST
City-St-Zip: JACKSONVILLE, FL 32201

Title: STD (X) Change () Addition
Name: COLEMAN, GARY B., JR.,
Address: 1015 HAINES STREET
City-St-Zip: JACKSONVILLE, FL 32206

I hereby certify that the information supplied with this filing does not qualify for the 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 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: GARY B. COLEMAN

PRES

01/18/2004

Electronic Signature of Signing Officer or Director

Date