2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 404338

Entity Name: CARLTON MUSIC CENTER, INC

FILED Jan 05, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

308 AVE D N W

WINTER HAVEN, FL 33882

Current Mailing Address: New Mailing Address:

PO BOX 1445

WINTER HAVEN, FL 33882

FEI Number: 59-1400936 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CARLTON, JOHN T CARLTON, GLEN C PRES 970 WEDGE WOOD DR 214 MCLEAN PT W

WINTER HAVEN, FL 33880 US WINTER HAVEN, FL 33884 US

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: GLEN C. CARLTON 01/05/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: BC () Delete Title: PRES (X) Change () Addition

 Name:
 CARLTON, JOHN T,
 Name:
 CARLTON, GLEN C

 Address:
 970 WEDGEWOOD DR SE
 Address:
 214 MCLEAN PT W

 City-St-Zip:
 WINTER HAVEN, FL 33880
 City-St-Zip:
 WINTER HAVEN, FL 33884

Title: S () Delete Title: VP (X) Change () Addition

Name: CARLTON, SALLY L, Name: CARLTON, RICHARD T

Address: 970 WEDGEWOOD DR SE Address: 5177 HIGHLANDS LAKEVIEW LOOP
City-St-Zip: WINTER HAVEN, FL City-St-Zip: LAKELAND, FL 33813

 Title:
 D
 () Delete
 Title:
 SEC
 (X) Change () Addition

 Name:
 CARLTON, SALLY L,
 Name:
 CARLTON, SALLY L

Address: 970 WEDGEWOOD DR SE Address: 970 WEDGEWOOD DR SE City-St-Zip: WINTER HAVEN, FL City-St-Zip: WINTER HAVEN, FL

Title: P () Delete Title: TRSR (X) Change () Addition Name: CARLTON, GLEN C., Name: CARLTON, SALLY L

 Address:
 214 MCLEAN PT.-W
 Address:
 970 WEDGEWOOD DR SE

 City-St-Zip:
 WINTER HAVEN, FL 33884
 City-St-Zip:
 WINTER HAVEN, FL 33880

 Name:
 CARLTON, RICHARD T
 Name:

 Address:
 5177 HIGHLANDS LAKEVIEW LOOP
 Address:

 City-St-Zip:
 LAKELAND, FL 33813
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: GLEN C. CARLTON PRES 01/05/2006