SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.) PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 1996 DIVISION OF CORPORATIONS **DOCUMENT #** 480708 (7) BIGGART MUSIC CO., INC. Principal Place of Business Mailing Address 846 WEST JEFFERSON STREET 646 WEST JEFFERSON STREET BROOKSVILLE FL 34601 **BROOKSVILLE FL 34801** 3. Date Incorporated or Qualified 3a. Date of Last Report 07/16/1975 04/19/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 59-1617841 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country This corporation has liability for intangible tax under s. 199.032. 24 25 29 30 Florida Statutes Yes 🔲 No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name BIGGART, JAMES G. **646 WEST JEFFERSON STREET** 82 Street Address (P.O. Box Number is Not Acceptable) **BROOKSVILLE FL 34601** 83 84 City 85 Zip Code 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 office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of Section 607.0505, Florida Statutes. SIGNATURE (NOTE: Required Agent signature responsitives size is (along) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/8)DELETE TITLE PD 1111116 Change Addition NAME BIGGART, JAMES G. 1.2 NAME **CR2E034** 626 W. JEFFERSON ST. STREET ADDRESS 1.3 STREET ADDRESS **BROOKSVILLE FL** CITY - ST - ZIP 1.4 CITY - ST - ZIP TITLE DELETE 2.1 TITLE Change Addition NAME 2.2 NAM6 STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZiP 2 4 CHTY - ST - 7/P THEF DELETE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3 3 SPREET ADDRESS CITY - ST - ZIP 34 CITY - ST-ZIP TITLE DELFTE 4.1 Title Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - \$1 - ZIP TITLE DELETE 5.1 THILE Change Addition NAME 5.2 NAMS STREFT ADDRESS 5.3 STREET ADDRESS CITY - ST - ZIP 5.4 C(1Y - ST - Z)P TITLE DELETE 6.1 MILE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY - ST - ZIP 6.4 City - ST, ZIP 14. I do hereby certify that the information further certify that the information indimade under oath, that I am an office. supplied with this filing is volunitarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statules. I also don't his annual report is supplemental annual report is true and accurate and that my signature shall have the same legal effect as if it does not not be copied at open or the receiver or trusted empowered to execute this report as required by Chapter 617, Florida Statutes, and that my name appears in Block 12 th an address 7-8-96 796-6739 SIGNATURE:

ICER OR DIRECTOR