

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 656682 (2)

1. Corporation Name

AL HAVENER'S KEYBOARDS, INC.



Principal Place of Business

5990 ULMERTON ROAD
CLEARWATER FL 34620-3942

Mailing Address

5990 ULMERTON ROAD
CLEARWATER FL 34620-3942

3. Date Incorporated or Qualified
02/21/1980

3a. Date of Last Report
04/24/1995

2. Principal Place of Business

21 2042 Bee Ridge Road

22 Suite, Apt. #, etc.

City & State

23 Sarasota, FL

Zip

24 34239

Country

25 Sarasota

2a. Mailing Address

26 2042 Bee Ridge Road

27 Suite, Apt. #, etc.

City & State

28 Sarasota, FL

Zip

29 34239

Country

30 Sarasota

4. FEI Number

59-1975451

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$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

GORMIN, GARY P.
3899 ULMERTON ROAD
CLEARWATER FL 34622

10. Name and Address of New Registered Agent

81 Name

Stephen F. Ellis

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

1800 Second Street

83

Suite 806

84

Sarasota

FL

85

34238

11. Pursuant to the provisions of Sections 607.002 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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligation of, Section 607.0504, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and date of appointment

(NOTE: Registered Agent Signature Required when Applicable)

DATE

Stephen F. Ellis 4/11/96

12. OFFICERS AND DIRECTORS

TITLE DP
NAME HAVENER, AL
STREET ADDRESS 5990 ULMERTON ROAD
CITY-ST-ZIP CLEARWATER FL ☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P/T/S/D
1.2 NAME GIA WOODRUM a/k/a GIA WOODRUM HAVENER
1.3 STREET ADDRESS 2042 Bee Ridge Road
1.4 CITY-ST-ZIP Sarasota, FL 34239 ☐ Change ☒ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP ☐ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP ☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP ☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP ☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP ☐ Change ☐ Addition

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:

Gia Woodrum Havener
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Gia Woodrum

4/11/96

Date

(Typed Name)

CR2E034 (12/95)