## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

# **FILED** Mar 06, 1999 8:00 am Secretary of State 03-06-1999 90057 012 \*\*\*150.00

DOCUI	MENI # 673033	)					
1. Corporation	1 Name						
SOUND	Management of St. Pet	IERSBURG, INC.					
Principal Place	e of Business	Mailing Address			T SOURCE OFFICE AND THE PROPERTY OF THE PARTY OF THE PROPERTY	ATÜKT BIĞIL GIBIL BI	(B)) Q(B)) IGO
2325 ULMERTOI		2325 ULMERTON ROAD					
SUITE 20 SUITE 20							
CLEARWATER FL 34622 CLEARWATER FL 34622					DO NOT WRITE IN THIS	S SPACE	
US		US			3. Date Incorporated or Qualifed		
					06/11/1980	<del></del>	
Principal Place of Business     2a. Mailing Address					4. FEI Number		plied For
21 26 Suite Apt. # etc. Suite Apt. #, et					59-2006644	\$8.75 A	t Applicable
					5. Certificate of Status Desired	Fee Red	
22     27					O. Floation Converse Streeting		<del></del>
					6. Election Campaign Financing Trust Fund Contribution	\$5.00 t Added to	
Zip	Country		Cour	ntry	This corporation owes the current year In		<del></del>
— <u> </u>	25	·	30	,	Personal Property Tax.		□No
24	9. Name and Address of Currer		1301		10. Name and Address of New Registered	Agent	
	J. Hame and Addition of Control			81 Name			
BULL	ard, fred B Jr				(200 20 11 11 11 11 11 11 11 11 11 11 11 11 11		
2325 ULMERTON RD				82 Street Ad	dress (P.O. Box Number is Not Acceptable)	-	
#20				83			
CLEARWATER FL 33762						<del></del>	
				84 City	FI	<b>85</b>   Zip C	;ode
14 Pureuant	to the provisions of Sections 607 050	32 and 607 1508. Florida Statutr	es, the ab	oove-named co	rnoration submits this statement for the purpose of	f changing its	registered
office or re	egistered agent or both in the State	of Florida. Such change was a	uthorized	by the corpora	tion's board of directors. I hereby accept the appoint	ointment as reg	gistered
agent. I a	m familiar with, and accept the obliga	itions of, Section 607.0505, Fiol	nda Statt	nes.			ļ
SIGNATURE	Signature, typed or printed name of registered age	int and title if applicable. (NOTE:	: Registered	Agent signature requi	ired when reinstating) DATE		<del></del>
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTO	RS IN 12
TITLE	PD	☐ DELETE	1.1 TIT	LE		☐ Change	☐ Addition
NAME	BULLARD, FRED B JR.			ME			
STREET ADDRESS 2325 ULMERTON ROAD SUITE 20			1.3 ST	REET ADDRESS			
CITY-ST-ZIP	OLEADAMATED EL		14 CIT	Y-ST-ZIP			
TITLE	ST	☐ DELETE	2.1 TIT	LE		☐ Change	Addition
NAME			2.2 NA	ME			
STREET ADDRESS				REET ADDRESS			
CITY-ST-ZIP	CLEARWATER FL 33762		2. 4 CF	TY-ST-ZIP	· nage		
TITLE	☐ DELETE		3.1 HT			☐ Change	Addition
NAME			3.2 NA	ME .			1
STREET ADDRESS			3.3 STI	REET ADDRESS			
CITY-ST-ZIP			3.4. CF	TY-ST-ZIP			
TITLE	☐ DELETE		4.1 TIT			☐ Change	☐ Addition
NAME			4.2 NA	WE			
STREET ADDRESS			4.3 ST	REET ADDRESS			
CITY-ST-ZIP			4.4 CIT	Y-ST-ZIP			
TITLE		☐ DELETE	5.1 TIT			Change	☐ Addition
NAME			5.2 NA	ME	•		
STREET ADDRESS			5.3 ST	REET ADDRESS			
CITY-ST-ZIP			5.4 CIT	Y-ST-ZIP			
TITLE		☐ DELETE	6.1 TIT	LE		☐ Change	☐ Addition
NAME			6.2 NA	ME			ł
STREET ADDRESS			6.3 ST	REET ADORESS			•

6.4 CITY-ST-ZIP CITY-ST-ZIP 14. 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 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 an an attachment with an address, with all other like empowered.

**SIGNATURE:** 

727-576-6424