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

Mar 26 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # 690891 (7) PIANO WORLD, INC. Principal Place of Business Mailing Address 672 LAKE VILLAS DR 672 LAKE VILLAS DR ALTAMONTE SPRINGS FL 32701 **ALTAMONTE SPRINGS FL 32701** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified <u>06/15/1981</u> 2. Principal Place of Business 2a. Mailing Address FEI Number Applied For 21 NOT APPLICABLE Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional Certificate of Status Desired 22 Fee Required 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Country This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name PENNINGTON, DAVID L **672 LAKE VILLAS DR** 82 Street Address (P.O. Box Number is Not Acceptable) **ALTAMONTE SPRINGS FL 32701** 83 64 City 65 Zip Code 11. 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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligatoris of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE Registered Agent signature required when reinstating) (10/97 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12 13. DELETE Addition Change TITLE 1.1 TITLE LONG, JACK E NAME 1.2 NAME CR2E034 RT.4, BOX 589R STREET ADDRESS 1.3 STREET ADDRESS PLANT CITY FL 00000 1.4 City-St-ZiP CITY - ST - ZIP DELETE Change Addition 2.1 TITLE TITLE LONG, NANCY 2.2 NAME NAME RT 4. BOX 589R 2.3 STREET ADDRESS STREET ADDRESS PLANT CITY, FL 00000 CITY-ST-ZIP 2.4 CITY-ST-ZIP Change DELETE Addition 3.1 TITLE TITLE PENNINGTON, DAVID L 3 2 NAME NAME 728 LAKE VILLAS DR 3.3 STREET ADDRESS STREET ADDRESS ALTAMONTE SPRINGS FL CITY-ST-ZIP 34. CITY-ST-ZIP DELETE Change Addition TITLE 41 TITLE PENNINGTON, ROSE ANN 4 2 NAME NAME 726 LAKE VILLAS DR STREET ADORESS 4.3 STREET ADDRESS ALTAMONTE SPRINGS FL CITY-ST-ZIP 44 CITY - ST - ZIP DELETE Change Addition TITLE 5.1 TITLE DENNING TON, LARRY 5.2 NAME NAME 914 VERSAILLES CIR. STREET ADDRESS 5 3 STREET ADDRESS MAITCAMO CITY-ST-ZIP 54 CITY-ST-ZIP

DELETE

TITLE NAME

STREET ADDRESS

SIGNATURE:

CITY-ST-ZIP

6.1 TITLE

6.2 NAME

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 supplymental 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 of 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 not attachment with an address.

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

FILED

Change

(407)

767-8333

Addition