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FILED

Jan 28 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # 694899

(6)

1. Corporation Name

FULL SAIL RECORDERS, INC.

Principal Place of Business

3300 UNIVERSITY BLVD.  
SUITE 180  
WINTER PARK FL 32792

Mailing Address

3300 UNIVERSITY BLVD.  
SUITE 180  
WINTER PARK FL 32792-7440

3. Date Incorporated or Qualified

07/09/1981

3a. Date of Last Report

05/01/1996

4. FEI Number

59-2111456

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution



\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes



Yes



No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

HADDOCK PROFESSIONAL ASSOCIATION  
3280 UNIVERSITY BLVD., SUITE 210  
WINTER PARK FL 32792

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85

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 obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and fee if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PSD ☐ DELETE

NAME PHELPS, JOHNATHAN D.  
STREET ADDRESS 3300 UNIVERSITY BLVD.  
CITY-ST-ZIP WINTER PARK FL

TITLE PSD ☐ DELETE

NAME HADDOCK, EDWARD E. JR  
STREET ADDRESS 3300 UNIVERSITY BLVD.  
CITY-ST-ZIP WINTER PARK FL

TITLE V ☐ DELETE

NAME JONES, GARRY  
STREET ADDRESS 3300 UNIVERSITY BLVD.  
CITY-ST-ZIP WINTER PARK FL

TITLE V ☒ DELETE

NAME PLATT, GARY  
STREET ADDRESS 3300 UNIVERSITY BLVD.  
CITY-ST-ZIP WINTER PARK FL

TITLE SD ☐ DELETE

NAME HEAVENER, JAMES W.  
STREET ADDRESS 3300 UNIVERSITY BLVD.,STE.180  
CITY-ST-ZIP WINTER PARK FL

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do 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 on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-15-97 402/6796171

Date

Daytime Phone #

CR2E034 (9/96)