FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED
95 APR 20 PM 12:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 710201 (5)

1. Corporation Name
THE MUSIC GUILD OF BOCA RATON, INC.

Principal Place of Business	Mailing Address
P.O. BOX 512 BOCA RATON FL 33429	P.O. BOX 512 BOCA RATON FL 33429

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 01/14/1966
3a. Date of Last Report: 01/21/1994
4. FEI Number: 23-7378093 ☐ 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
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☑ **$68.75** Supplemental Fee Not Required
8. The corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☑ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

TOBIAS, EDITH
7649 LONDON LANE
BOCA RATON FL 33433

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	☐ Change ☐ Addition
NAME	TOBIAS, EDITH	1.2 NAME	
STREET ADDRESS	7649 LONDON LANE	1.3 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON FL	1.4 CITY-ST-ZIP	
TITLE	VD	2.1 TITLE	VD ☑ Change ☐ Addition
NAME	JENNE, RUTH	2.2 NAME	FRENCH, MARTI
STREET ADDRESS	23371 BLUEWATER CIR	2.3 STREET ADDRESS	2768 N.W. 28TH TERRACE
CITY-ST-ZIP	BOCA RATON FL	2.4 CITY-ST-ZIP	BOCA RATON, FL 33434
TITLE	VD	3.1 TITLE	☐ Change ☐ Addition
NAME	WESTERVELT, MARGARET	3.2 NAME	
STREET ADDRESS	10 SE 13TH ST C-3	3.3 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON FL	3.4 CITY-ST-ZIP	
TITLE	VD	4.1 TITLE	VD ☑ Change ☐ Addition
NAME	LEVY, SYLVAN	4.2 NAME	QUIRINDONGO, JULIE
STREET ADDRESS	22752 MERIDIANA DR	4.3 STREET ADDRESS	21536 CAVANDISH ROAD
CITY-ST-ZIP	BOCA RATON FL	4.4 CITY-ST-ZIP	BOCA RATON, FL 33433
TITLE	SD	5.1 TITLE	SD ☑ Change ☐ Addition
NAME	WARD, JEANNE	5.2 NAME	ALEXANDER, NANCY
STREET ADDRESS	1505 SOUTH OCEAN BLVD., #6	5.3 STREET ADDRESS	2850 CANYON BLVD. CIRCLE N.W.
CITY-ST-ZIP	BOCA RATON FL	5.4 CITY-ST-ZIP	BOCA RATON, FL 33431
TITLE	TD	6.1 TITLE	☐ Change ☐ Addition
NAME	TOBIAS, ROBERT	6.2 NAME	
STREET ADDRESS	7649 LONDON LANE	6.3 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON FL	6.4 CITY-ST-ZIP	

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)(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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Robert L. Tobias ROBERT L. TOBIAS 4/16/95 (407) 395-5349
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #