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 MAY -1 PM 12:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 735129 (9)

1. Corporation Name
KING HIGH SCHOOL MUSIC CLUB, INC.

Principal Place of Business	Mailing Address
% KING HIGH SCHOOL 6815 NORTH 56TH STREET TEMPLE TERRACE FL 33617	% KING HIGH SCHOOL 6815 NORTH 56TH STREET TEMPLE TERRACE FL 33617

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 03/04/1976
3a. Date of Last Report: 06/06/1994
4. FEI Number: NOT APPLICABLE — ☐ Applied For ☒ Not Applicable

2. Principal Place of Business	2a. Mailing Address	5. Certificate of Status Desired ☐	$8.75 Additional Fee Required
21	26		
Suite, Apt. #, etc.	Suite, Apt. #, etc.	6. Election Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees
22	27		
City & State	City & State	7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐	$68.75 Supplemental Fee Not Required
23	28		
Zip / Country	Zip / Country	8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No	
24 / 25	29 / 30		

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
KING, JOHN M 6407 S. QUEENSWAY DRIVE TEMPLE TERRACE FL 33617	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: John M King — 4-22-95
Signature, typed or printed name of registered agent and title if applicable. NOTE: Registered Agent signature required when reinstating. DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	☐ Change ☐ Addition
NAME	KING, JOHN M	1.2 NAME	
STREET ADDRESS	6407 S. QUEENSWAY DRIVE	1.3 STREET ADDRESS	
CITY-ST-ZIP	TEMPLE TERRACE FL 33617	1.4 CITY-ST-ZIP	
TITLE	VPD	2.1 TITLE	☐ Change ☐ Addition
NAME	WOOD, DONALD	2.2 NAME	
STREET ADDRESS	1269 FOUR SEASONS BLVD.	2.3 STREET ADDRESS	
CITY-ST-ZIP	TEMPLE TERRACE FL 33613	2.4 CITY-ST-ZIP	
TITLE	VPD	3.1 TITLE	☐ Change ☐ Addition
NAME	REED, TOM	3.2 NAME	
STREET ADDRESS	9305 ALANBROOKE STREET	3.3 STREET ADDRESS	
CITY-ST-ZIP	TAMPA FL 33637	3.4 CITY-ST-ZIP	
TITLE	S	4.1 TITLE	☐ Change ☐ Addition
NAME	LICATA, MILLIE	4.2 NAME	
STREET ADDRESS	11720 FIFE AVENUE	4.3 STREET ADDRESS	
CITY-ST-ZIP	TAMPA FL 33617	4.4 CITY-ST-ZIP	
TITLE	T	5.1 TITLE	☐ Change ☐ Addition
NAME	MARD, PAM	5.2 NAME	
STREET ADDRESS	11505 HUMBER PL.	5.3 STREET ADDRESS	
CITY-ST-ZIP	TEMPLE TERRACE FL 33617	5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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: John M King — 4-16-95 — 813-276-1070
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

008346