

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L40023

FILED
Jan 29, 2004
Secretary of State

Entity Name: DOLLARHIDE'S MUSIC CENTER, INC.

Current Principal Place of Business:

41 SOUTH PALAFOX PLACE
PENSACOLA, FL 32501

New Principal Place of Business:

41 SOUTH PALAFOX PLACE
PENSACOLA, FL 32502

Current Mailing Address:

41 SOUTH PALAFOX PLACE
PENSACOLA, FL 32501

New Mailing Address:

41 SOUTH PALAFOX PLACE
PENSACOLA, FL 32502

FEI Number: 59-3001461

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DOLLARHIDE, WILLIAM
41 SOUTH PALAFOX PLACE
PENSACOLA, FL 32501

Name and Address of New Registered Agent:

DOLLARHIDE, WILLIAM
41 SOUTH PALAFOX PLACE
PENSACOLA, FL 32502

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: WM. B. DOLLARHIDE

01/29/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: DOLLARHIDE, WILLIAM,
Address: 41 SOUTH PALAFOX PLACE
City-St-Zip: PENSACOLA, FL 32501

Title: D () Delete
Name: DOLLARHIDE, MARGARET, P.
Address: 41 SOUTH PALAFOX PLACE
City-St-Zip: PENSACOLA, FL 32501

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARGARET P. DOLLARHIDE

D

01/29/2004

Electronic Signature of Signing Officer or Director

Date