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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L62627

FILED Feb 12, 1999 8:00am **Secretary of State**

02-12-1999 90002 019 ***150.00

1. Corporation	n Name —									
COMMUNITY PIANO, INC.								1 (40)(0() D(0 4)() (10)(0 0())(0 ()()() (20) 0(0)()	A(B(4 E)E() A16	11 0:0 1: 0:01: :00
Principal Place	e of Business	Ma	ailing Address					-	81811 B1811 B181	II DIBIS DIBIS IBBI
1128 STATE AV	/ENUE	112	8 STATE AVENUE							
HOLLY HILL FL 32117 HOLLY HILL FL 32117								DO NOT WRITE IN THI	S SPACE	
								3. Date Incorporated or Qualifed		
								04/05/1990		
2 Principal P	lace of Business	2a.	. Mailing Address					4. FEI Number		Applied For
21	1400 0. 242	26	•					59-3012643		Not Applicable
Suite, Apt.	#, etc.	1	Suite, Apt. #, etc.					5. Certificate of Status Desired		5 Additional
22		27						3. Certificate by Claude Desired		Required
City & Stat	te		City & State					6. Election Campaign Financing		May Be
23		28						Trust Fund Contribution		ed to Fees
Zip	Country	-	Zip		Country	•		8. This corporation owes the current year i	ntangible Maryes	□No
24	25	29		30				Personal Property Tax. 10. Name and Address of New Registere		
	9. Name and Address of Curren	t Kegis	stered Agent		81	Nam		10. Name and Address of New Registers	Agent	
HOL	NSON, RONALD N.									
	SOUTH GRANDVIEW AVENUE				82	Stree	t Addre	ess (P.O. Box Number is Not Acceptable)		
DAYTONA BEACH FL 32118					83				3, 11,	1 13 45 5
2717									· · · · · · · · · · · · · · · · · · ·	<u> 14 (14) 46 </u>
					84	City		F	85 Zi	ip Code '
44 Dureugnt	to the provisions of Sections 607 050	2 and 6	07.1508. Florida Statut	es. the	e above	le-name	д согрс	oration submits this statement for the purpose	of changing	its registered
agent. I a	registered agent, or both, in the oddle arm familiar with, and accept the obliga	tions of	, Section 607.0505, Flo	rida S	tatutes			n's board of directors. I hereby accept the app		
SIGNATURE	Signature, typed or printed name of registered ager					nt signatur	required	when reinstating) DATE		T000 III 40
12.	OFFICERS AN	D DIRE			3.			ADDITIONS/CHANGES TO OFFICERS	AND DIREC	
TITLE	PD		☐ DELETE		1 TITLE				[] Origing	je Ejriddilloti
NAME	PEARSON, WALTER T.				2 NAME					
STREET ADDRESS						TADDRES	5			
CITY-ST-ZIP	DAYTONA BEACH FL		☐ DELETE		4 CITY-S	I-ZIP	+		[] Chang	e [] Addition
TITLE	SD DEADOON HELEN O		- Occesie		2 NAME					_
NAME	PEARSON, HELEN C. 524 ELIZABETH PLACE					T ADDRES				
STREET ADDRESS	DAYTONA BEACH FL				. 4 CITY-S		Ĭ .		:	
CITY-ST-ZIP TITLE	TD		☐ DELETE		1 TITLE		+		☐ Chang	ge Addition
NAME.	PEARSON, TYRRELL			3.	2 NAME					
STREET ADDRESS				3.	3 STREE	T ADDRES	s		,	
CITY-ST-ZIP	DAYTONA BEACH FL			3.	.4. CITY-S	ST-ZIP				<u> </u>
TITLE			☐ DELETE	4	1 TITLE			,	Chang	ge 🔃 Addition
NAME				4	2 NAME					
STREET ADDRESS	3			4	3 STREE	TADDRES	s			
CITY-ST-ZIP				_	4 CITY-S	T-ZiP				
TITLE	1		☐ DELETE		1 TITLE				Chang	ge 🗌 Addition
NAME					2 NAME			•		
STREET ADDRESS	i i					T ADDRES	S			
CITY-ST-ZIP			D DELETE	_	.4 CITY-S	I-ZIP	-		☐ Chanc	ge 🔲 Addition
TITLE			☐ DELETE							io Cumpii
NAME					.2 NAME	T ADDRES				
STREET ADDRESS	5			6	.o o IKEE	ADDRES	۱"			

CITY-ST-ZIP 14. 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, with all other like empowered.

SIGNATURE: