2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 05, 2004
Secretary of State

DOCUMENT# N00000003289

Entity Name: GRACE MUSIC, INC.

Current Principal Place of Business:

5030 COMMERCE PARK CIR.
PENSACOLA, FL 32505

New Principal Place of Business:

P.O. BOX 12357
PENSACOLA, FL 32591

Current Mailing Address:

P.O BOX 12357
PENSACOLA, FL 32591

New Mailing Address:

FEI Number: 59-3652447 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FOLKERS, SPARKIE
5030 COMMERCE PARK CIR.
PENSACOLA, FL 32505 US

Name and Address of New Registered Agent:

FOLKERS, SPARKIE
2 FAIRPOINT PLACE
GULF BREEZE, FL 32561 US

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: _____ 04/05/2004
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: BELL, JAMES R
Address: 4040 SOUNDPOINTE DR.
City-St-Zip: GULF BREEZE, FL 32561

Title: D ( ) Delete
Name: REED, SHEILA
Address: 3325 DUNNING DR.
City-St-Zip: PACE, FL 32571

Title: D ( ) Delete
Name: RAMOS, TAMELA
Address: 11000 UNIVERSITY PKWY.
City-St-Zip: PENSACOLA, FL 32514

Title: D ( ) Delete
Name: FOLKERS, SPARKIE
Address: 2 FAIRPOINT PL.
City-St-Zip: GULF BREEZE, FL 32561

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SPARKIE FOLKERS D 04/05/2004
Electronic Signature of Signing Officer or Director — Date