2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 04, 2004
Secretary of State

DOCUMENT# N01000001617

Entity Name: FLORIDA MUSIC FOUNDATION, INCORPORATED

Current Principal Place of Business:

207 OFFICE PLAZA DR.
TALLAHASSEE, FL 32301 US

New Principal Place of Business:

Current Mailing Address:

207 OFFICE PLAZA DR.
TALLAHASSEE, FL 32301 US

New Mailing Address:

FEI Number: 59-3703991 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PERRY, JAMES T
207 OFFICE PLAZA DR.
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: SANZ, KATHLEEEN
Address: 7227 LAND O' LAKES BLVD.
City-St-Zip: LAND O' LAKES, FL 34639 US

Title: P/D ( ) Delete
Name: ORTEGA, MERRY
Address: 7200 THOMASVILLE ROAD
City-St-Zip: TALLAHASSEE, FL 32308 US

Title: D ( ) Delete
Name: DEARING, ROGER
Address: 1990 25TH STREET
City-St-Zip: VERO BEACH, FL 32960 US

Title: M ( ) Delete
Name: PERRY, JAMES T
Address: 207 OFFICE PLAZA DRIVE
City-St-Zip: TALLAHASSEE, FL 32301 US

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: JAMES T. PERRY M 02/04/2004

Electronic Signature of Signing Officer or Director — Date