


**2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Feb 06, 2008 8:00 am**  
**Secretary of State**

02-06-2008 90026 024 \*\*\*\*61.25

<b>DOCUMENT # N0100006903</b>			
1. Entity Name THE VILLAGES MUSICAL COMPANY			
Principal Place of Business 1720 HILTON HEAD BLVD. LADY LAKE, FL 32159		Mailing Address 1720 HILTON HEAD BLVD. LADY LAKE, FL 32159	
2. Principal Place of Business - No P.O. Box # 2507 PRIVADA DRIVE Suite, Apt. #, etc.		3. Mailing Address 2507 PRIVADA DRIVE Suite, Apt. #, etc.	
City & State THE VILLAGES, FL.		City & State THE VILLAGES, FL.	
Zip 32162	Country USA	Zip 32162	Country USA
4. FEI Number 59-3738852		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent LEFFIERO, RAYMOND 1720 HILTON HEAD BLVD. LADY LAKE, FL 32159		7. Name and Address of New Registered Agent Name ANTHONY BATTAGLIA Street Address (P.O. Box Number is Not Acceptable) 2507 PRIVADA DRIVE City THE VILLAGES FL Zip Code 32162	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE: <u>Anthony Battaglia</u>		DATE: <u>02/04/08</u>	
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GREENFIELD, CAROL 1762 W SCHWARTZ BLVD LADY LAKE, FL 32159 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD BRUSHMANN, DONALD 1010 ALOHA WAY LADY LAKE, FL 32159 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BOORUM, DIANE 1842 W SCHWARTZ BLVD LADY LAKE, FL 32159 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD LEGGIERO, RAYMOND 1726 HILTON HEAD BLVD. LADY LAKE, FL 32159 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LEGGIERO, RAYMOND 1726 HILTON HEAD BLVD. LADY LAKE, FL 32159 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BATTAGLIA, TONY 2507 PRIVADA DR. LADY LAKE, FL 32159 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD BATTAGLIA, ANTHONY 2507 PRIVADA DRIVE THE VILLAGES, FL 32162 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KNAPTON, JOAN 1464 MLEXA PL THE VILLAGES, FL 32162 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KNAPTON, JOAN 1464 ALEKA PL. THE VILLAGES, FL 32162 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GIANNONI, PHILANENA 1705 PACMAIR DR LADY LAKE, FL 32159 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HAWTHORNE, SANDRA 1221 TARPON LN. LADY LAKE, FL 32159 <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: <u>Anthony Battaglia</u>		ANTHONY BATTAGLIA 02/04/08 (352) 751-1165	
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	