

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000006903

FILED  
Feb 22, 2010  
Secretary of State

**Entity Name:** THE VILLAGES MUSICAL COMPANY

**Current Principal Place of Business:**

2507 PRIVADA DR  
LADY LAKE, FL 32162

**New Principal Place of Business:**

**Current Mailing Address:**

2507 PRIVADA DR  
LADY LAKE, FL 32162

**New Mailing Address:**

FEI Number: 59-3738852

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BATTAGLIA, ANTHONY C  
2507 PRIVADA DR  
LADY LAKE, FL 32162 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  
Name: GREENFIELD, CAROL  
Address: 1762 W SCHWARTZ BLVD  
City-St-Zip: LADY LAKE, FL 32159

Title: PD  
Name: BOORUM, DIANE  
Address: 1842 W SCHWARTZ BLVD  
City-St-Zip: LADY LAKE, FL 32159

Title: SD  
Name: HAUSMANN, DONALD  
Address: 1010 ALOHA WAY  
City-St-Zip: LADY LAKE, FL 32159

Title: D  
Name: LEGGIERO, RAYMOND  
Address: 1726 HILTON HEAD BLVD  
City-St-Zip: LADY LAKE, FL 32159

Title: D  
Name: HAWTHORNE, SANDIE  
Address: 1755 LAUREN LANE  
City-St-Zip: LADY LAKE, FL 32159

Title: D  
Name: KNAPTON, JOAN  
Address: 1464 ALEXA PL  
City-St-Zip: LADY LAKE, FL 32162

I hereby 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 all other like empowered.

SIGNATURE: ANTHONY C. BATTAGLIA

TREA

02/22/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date