

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N23111

FILED
Apr 19, 2005
Secretary of State

Entity Name: NATIONAL MUSIC FOUNDATION, INC.

Current Principal Place of Business:

2457A SOUTH HIAWASSEE RD
#244
ORLANDO, FL 32835 US

New Principal Place of Business:

Current Mailing Address:

2457A SOUTH HIAWASSEE RD
#244
ORLANDO, FL 32835 US

New Mailing Address:

FEI Number: 59-2852994 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VELTMAN, JACQUELYN
310 ALEXANDRA WOODS DRIVE
DEBARY, FL 34713 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: PD () Delete
Name: PENNINGTON, GLORIA A
Address: 2457A SOUTH HIAWASSEE RD #244
City-St-Zip: ORLANDO, FL 32835

Title: SD () Delete
Name: VELTMAN, JACQUELYN
Address: 310 ALEXANDRA WOODS DRIVE
City-St-Zip: DEBARY, FL 34713

Title: D () Delete
Name: GLENN, BARRY M ESQ
Address: 2708 ALT. 19 NORTH, SUITE 701
City-St-Zip: PALM HARBOR, FL 34683 US

Title: C () Delete
Name: COTTON, ROBERT
Address: PO BOX 227
City-St-Zip: HOPKINTON, MA 01748 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: GLORIA PENNINGTON

PD

04/19/2005

Electronic Signature of Signing Officer or Director

Date