

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jan 31, 2006 08:00 AM
Secretary of State

DOCUMENT # N92000000666 1. Entity Name SARASOTA MUSIC ARCHIVE, INC.					
Principal Place of Business 1331 FIRST STREET SARASOTA FL 34236 US			Mailing Address 1331 FIRST STREET SARASOTA FL 34236 US		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		4. FEI Number 65-0295646	
5. Certificate of Status Desired ☐				1st MOORE CR2E037 (10/05)	
6. Name and Address of Current Registered Agent ROSI, ALFRED J 1331 FIRST STREET SARASOTA FL 34236				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City	
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 _____ (NOTE: Registered Agent signature required when reappointing)					
FILE NOW: FEE IS \$61.25 Due By May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. ☐		\$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	TD SCHIFFMAN, JAMES 3820 AMAPOLA AVENUE SARASOTA FL	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ROSI, ALFRED J 4412 OAK VIEW DR. SARASOTA FL	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD WESTLAKE, JOAN R 4085 OAKHURST DR. SARASOTA FL	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LEITER, MARTHA 4346 BRYANTS POND LANE SARASOTA FL	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ROTH, PAUL 3709 POND VIEW LANE SARASOTA FL	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HARRIS, PAUL 1540 GLEN OAKS DR. #232B SARASOTA FL	☐ Delete			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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.					



1st MOORE CR2E037 (10/05)

4. FEI Number **65-0295646** Applied For Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

**FILE NOW: FEE IS \$61.25
Due By May 1, 2006**

9. Election Campaign Financing
 Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

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02/10/06-80056-013 61.25

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SIGNATURE *James Schiffman* James Schiffman, Treasurer January 27, 2006