

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000000926

Entity Name: RED RIBBON MUSIC, INC.

FILED
Jun 10, 2006
Secretary of State

Current Principal Place of Business:

8205 WELLSMERE CIRCLE
ORLANDO, FL 32835

New Principal Place of Business:

8205 WELLSMERE CIRCLE
ORLANDO, FL 32835 US

Current Mailing Address:

8205 WELLSMERE CIRCLE
ORLANDO, FL 32835

New Mailing Address:

8205 WELLSMERE CIRCLE
ORLANDO, FL 32835 US

FEI Number: 59-3439181 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

ROMANO, DIANE
8205 WELLSMERE CIRCLE
ORLANDO, FL 32835 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: ROMANO, DIANE
Address: 8205 WELLSMERE CIRCLE
City-St-Zip: ORLANDO, FL 32835 US

Title: VPD () Delete
Name: KALBER, PATRICIA
Address: 11755 MAPLE STREET
City-St-Zip: ORLANDO, FL 32836 US

Title: D () Delete
Name: LEVENTHAL, LISA
Address: 11471 S.W. 105TH TERRACE
City-St-Zip: MIAMI, FL 33176 US

Title: T () Delete
Name: GOBER, CARL
Address: 6928 COUNTRY CORNERS LANE
City-St-Zip: ORLANDO, FL 32809 US

Title: S () Delete
Name: BAER, GARY
Address: 1500 ASBURY AVENUE
City-St-Zip: ORLANDO, FL 32803 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: LEVENTHAL, LISA
Address: 11505 S. W. 85TH AVENUE
City-St-Zip: MIAMI, FL 33156 US

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 Chapter 119, 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: DIANE ROMANO

PD

06/10/2006

Electronic Signature of Signing Officer or Director

Date