

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2006 08:00 AM
Secretary of State

DOCUMENT # N97000001986 1. Entity Name CONTEMPORARY MUSIC COOPERATIVE CORP.	
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Principal Place of Business P.O. BOX 833142 MIAMI, FL 33283-3142	Mailing Address P.O. BOX 833142 MIAMI, FL 33283-3142
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04152006 No Chg-NP CR2E037 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0783684	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent CUTRERA, ANTHONY 8349 SW 107 AVE APT. 8 MIAMI, FL 33173

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IN THIS SPACE**

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 reinstating) DATE _____

**Filing Fee is \$61.25
Due by May 1, 2006**

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PT CUTRERA, ANTHONY 14390 SW 98 TERR MIAMI, FL 33186
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BILLINGTON, ROBERT P.O. BOX 833142 (N/A) MIAMI, FL 332833142
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S LETONA, MARIA P.O. BOX 833142 (N/A) MIAMI, FL 332833142
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KAM, DENNIS UNIVERSITY OF MIAMI SCHOOL OF MUSIC CORAL GABLES, FL 33124
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FLOYD, J. B. DR. 4841 S.W. 64 CT. MIAMI, FL 33155
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ACEBO, MANUEL 7384 S.W. 80 STREET, APT. #25 MIAMI, FL 33143

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05/04/06-80003-008 61.25

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IN THIS SPACE**

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: *Anthony Cutrera* *Anthony Cutrera* 4/18/06 305 6303564
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #