2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000047933

Entity Name: NARROW DOOR RECORDS, INC.

FILED Apr 16, 2003 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

9700 - 90 AVENUE NORTH LARGO, FL 33777 US

Current Mailing Address: New Mailing Address:

9700 - 90 AVENUE NORTH LARGO, FL 33777 US

FEI Number: 59-3734875 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

FLIPPIN, RICHARD A 9700 - 90 AVENUE NORTH LARGO, FL 33777 US

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

Title:

Title:

Name:

Address:

City-St-Zip:

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition

() Change () Addition

Title: T/D () Delete
Name: SWARTOUT, KATHY M
Address: 9978 INDIAN KEY TRAIL

Address: 9978 INDIAN KEY TRAIL
City-St-Zip: SEMINOLE, FL 33776 US

 Title:
 P/D
 () Delete

 Name:
 FLIPPIN, RICHARD A

 Address:
 9700 90TH AV NO

 City-St-Zip:
 LARGO, FL 33777 US

Title: V/D () Delete Name: FLIPPIN, BARBARA P Address: 9700 90TH AV NO

Address: 9700 90TH AV NO
City-St-Zip: LARGO, FL 33777 US

 Title:
 S/D
 () Delete

 Name:
 POTTER, TONYA L

 Address:
 9926 120TH COURT

 City-St-Zip:
 SEMINOLE, FL 33772 US

Address:

BARBARA, FLIPPIN

9700 90TH AVE NO

LARGO, FL 33777 US

Name: Address: City-St-Zip:

Title: V/D (X) Change () Addition

Name: CORY, JAMES

Address: 6440 62ND AVE NO APT 402 City-St-Zip: PINELLAS PARK, FL 33781 US

Title: S/D (X) Change () Addition

Name: RHONDA, WING Address: 9859 83RD WAY NO City-St-Zip: LARGO, FL 33777 US

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BARBARA FLIPPIN T/D 04/16/2003