U	NIFORM BUSINE	SS REPORT		
DOCUMENT # POZ ODOW & 9.99 1. Entity Name Tursongs Music Publishing Inc.				FILED 04 APR 28 AN 9: 24
DO NOT WRITE IN THIS SPACE				SECRETARY OF STATE TALLAHASSEE, FLORIDA
Principal Place of Business 7940 Front Beach Rd		3. Mailing Address 7549 W. Cactus Rd		
Suite, Apt. #, etc. 203		Suite, Apt. #, etc. 104-242		DO NOT WRITE IN THIS SPACE
City & State Panama City Beach, FL		City & State Peoria, AZ		4. FEW Ther 05 38283 Applied For Not Applicable
^{Zip} 32407	Country USA	^{Zip} 85381	Country USA	5. Certificate of Status Desired See Required Fee Required
- DO NOT WRITE - IN THIS SPACE			Street Add	piegel & Utrera, P.A. Iress (P.O. Box Number is Not Acceptable) FL Zip Code 33 145
the obligations of registered agent. SIGNATURE Signature, Noted or printed name of registered agent and title if applicable. January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 Make Check Payable to Florida Department of State				9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	OFFICERS AND DIRECTORS President, Director, Secretary Terry Denton 7549 W. Castus Rd 104 242 Pooris Az 85381		TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	900035785329 05/07/0401094015 **150.00
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	TABDRESS ST-ZIP Tresurer Kathy Jenkins 4133 Harbor Rd. Orongo booch, Al		NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME	
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	36561		STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE	I		TITLE	

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or on an attachment with an address, with all other like empowered.

NAME

STREET ADDRESS CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP