

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**May 09, 2005 8:00 am**  
**Secretary of State**

DOCUMENT # P03000045355

1. Entity Name

4A EVER BALLIN RECORDS, INC.



05-09-2005 90316 001 \*\*\*150.00

05-09-2005 90316 002 \*\*\*\*\*8.80

Principal Place of Business

2912 N NEBRASKA AVE  
TAMPA FL

Mailing Address

POST OFFICE BOX 26061  
TAMPA FL 33623-6061



2. Principal Place of Business

2912 N. Nebraska ave

Suite, Apt. #, etc.

3. Mailing Address

P.O. Box 26061

Suite, Apt. #, etc.

1st MOORE

CR2E034 (10/04)

City & State

Tampa, FL

Zip

33602

Country

City & State

Tampa, FL 33623

Zip

33623

Country

4. FEI Number

56-2349082

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

SPIEGEL & UTRERA, P.A.  
1840 SOUTHWEST 22 STREET, 4TH FLOOR  
MIAMI FL 33145

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2005 Fee Will Be \$550.00**

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

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE DPCE ☐ Delete  
NAME FORD, HARRY L  
STREET ADDRESS 4405 W. WISCONSIN AVE  
CITY-ST-ZIP TAMPA FL 33616

TITLE VS ☐ Delete  
NAME FORD, MARK A  
STREET ADDRESS 4405 W. WISCONSIN AVE  
CITY-ST-ZIP TAMPA FL 33616

TITLE V ☐ Delete  
NAME FORD-POP, DEBORAH  
STREET ADDRESS 4405 W. WISCONSIN AVE  
CITY-ST-ZIP TAMPA FL 33616

TITLE S ☐ Delete  
NAME COLEMAN, RONALD A  
STREET ADDRESS 3111 W MARCUM STREET APT A  
CITY-ST-ZIP TAMPA FL 33611

TITLE T ☐ Delete  
NAME NEWSON, BRIAN J  
STREET ADDRESS 1934 W CYPRESS STREET  
CITY-ST-ZIP TAMPA FL 33606

TITLE T ☐ Delete  
NAME SMIS, BENAL  
STREET ADDRESS 4405 W. WISCONSIN AVE  
CITY-ST-ZIP TAMPA FL

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Harry L Ford*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/30/05 (813) 992-5322