

2004 FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 12, 2004 8:00 am
Secretary of State

01-29-2004 90026 039 ***150.00

DOCUMENT # P03000072197

1. Entity Name
SQUARE RECORDS, INC.



Principal Place of Business
**5322 SEWELL RD
MILTON FL 32570**

Mailing Address
**5322 SEWELL RD
MILTON FL 32570**

2. Principal Place of Business
5322 Sewell RD

3. Mailing Address
5322 Sewell RD

Suite, Apt. #, etc.

City & State
MILTON FL

City & State
MILTON FL

Zip
32570

Country
SANTAROSA

Zip
32570

Country
Santa Rosa

4. FEI Number

Applied For
☒ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**



MOORE CR2E034 (11/03)

6. Name and Address of Current Registered Agent
**DUCKER, ERIK
5651 COUNTRY SQUIRE DR
MILTON FL 32570**

7. Name and Address of New Registered Agent
Name **Paul W. RAUGHT**
Street Address (P.O. Box Number is Not Acceptable)
5322 Sewell RD
City **MILTON** FL Zip Code **32570**

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 **Paul W. Raught** **Vice President** **1-20-09**
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, 2004 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 NAME STREET ADDRESS CITY-ST-ZIP	DP RAUGHT, RACHEL 5322 SEWELL RD MILTON FL 32570	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV DUCKER, CHRISTOPHER 5651 COUNTRY SQUIRE DR MILTON FL 32570	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS RAUGHT, RACHEL 5651 COUNTRY SQUIRE DR MILTON FL 32570	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT DUCKER, CHRISTOPHER 5651 COUNTRY SQUIRE DR MILTON FL 32570	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Paul William Raught	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Paul William Raught	☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	owner President Rachel Raught 5322 Sewell RD MILTON, FL 32570	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	no longer with us	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Rachel Raught Secretary 5322 Sewell RD MILTON, FL 32570	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	no longer with us	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President Paul W. Raught 5322 Sewell RD MILTON, FL 32570	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer Paul W. Raught 5322 Sewell RD MILTON, FL 32570	☐ Change ☒ Addition

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: **Paul W. Raught** **1-20-09** **8503**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #