


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 22, 2008 8:00 am
Secretary of State

01-22-2008 90079 037 ***150.00

DOCUMENT # P03000079243

1. Entity Name
NOTEWORTHY MUSIC CORP



Principal Place of Business Mailing Address
6515 STILLWATER AVENUE **6515 STILLWATER AVENUE**
COCOA, FL 32927 **COCOA, FL 32927**

2. Principal Place of Business - No P.O. Box # 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

6. Name and Address of Current Registered Agent

VENUTI, LOUIS
400 ORANGE STREET
TITUSVILLE, FL 32796

40008138



01162008 Chg-P CR2E034 (12/06)

4. FEI Number Applied For
51-0475145 Not Applicable

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

7. Name and Address of New Registered Agent

Name **TOLSON, JOHN**
 Street A **400 ORANGE STREET**
 City **TITUSVILLE, FL 32796**
 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: *John M. Tolson* DATE: **1/16/08**

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO RETTSCHLAG, SHANNON R 6515 STILLWATER AVENUE COCOA, FL 32927	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO RETTSCHLAG, LAURA F 6515 STILLWATER AVENUE COCOA, FL 32927	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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 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: *Shannon R. Rettschlag* **SHANNON R. RETTSCHLAG** 1-17-08 (321)639-3111

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daviess Phone