## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000027347

Entity Name: GIVING TREE MUSIC, INC.

FILED Apr 15, 2009 Secretary of State

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

2047 INDIGO DR. 2647 AUGUSTA DRIVE NORTH CLEARWATER, FL 33763 CLEARWATER, FL 33761

Current Mailing Address: New Mailing Address:

2047 INDIGO DR. 2647 AUGUSTA DRIVE NORTH CLEARWATER, FL 33763 CLEARWATER, FL 33761

FEI Number: 05-0603031 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:

TURNER, K. LAUREL
2047 INDIGO DR.
CLEARWATER, FL 33763 US

TURNER, K. LAUREL
2647 AUGUSTA DRIVE NORTH
CLEARWATER, FL 33761 US

CLEARWATER, FL 33761 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: 04/15/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title: P ( ) Delete
Name: TURNER, STEVEN

Address: 2047 INDIGO DR.

City-St-Zip: CLEARWATER, FL 33763

Title: VST ( ) Delete Name: TURNER, K. LAUREL

Address: 2047 INDIGO DR.
City-St-Zip: CLEARWATER, FL 33763

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition

Name: TURNER, STEVEN

Address: 2647 AUGUSTA DRIVE NORTH City-St-Zip: CLEARWATER, FL 33761

Title: VST (X) Change ( ) Addition

Name: TURNER, K. LAUREL

Address: 2647 AUGUSTA DRIVE NORTH City-St-Zip: CLEARWATER, FL 33761

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: STEVEN TURNER P 04/15/2009