

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000055582

**FILED**  
**Apr 30, 2010**  
**Secretary of State**

**Entity Name:** CENTER STAGE MUSIC & EVENTS, INC.

**Current Principal Place of Business:**

11101-1 ST AUGUSTINE RD #43  
JACKSONVILLE, FL 32257

**New Principal Place of Business:**

11250-15 OLD ST AUGUSTINE RD #111  
JACKSONVILLE, FL 32257

**Current Mailing Address:**

11101-1 ST AUGUSTINE RD #43  
JACKSONVILLE, FL 32257

**New Mailing Address:**

11250-15 OLD ST AUGUSTINE RD #111  
JACKSONVILLE, FL 32257

FEI Number: 20-1087211

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MEIDE, MOSES JR  
817 N MAIN ST  
JACKSONVILLE, FL 32202 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: MCBRIDE, ANNE  
Address: 10717 HAYDEN AVE  
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: VSTD  
Name: MCBRIDE, JAMES T  
Address: 11319 RUSTIC PINES CIRCLE  
City-St-Zip: JACKSONVILLE, FL 32257

I hereby 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 all other like empowered.

SIGNATURE: JAMES T. MCBRIDE

VSTD

04/30/2010

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date