

2008 FOR PROFIT CORPORATION ANNUAL REPORT

9/12/2008-90003-004-\$150.00-\$150.00

FILED

08 OCT 15 AM 10:24

CLERK OF THE COURT
TALLAHASSEE, FLORIDA



09022008 Chg-P CR2E034 (12/06)

DOCUMENT # P04000090775 1. Entity Name BASSGROOVE MUSIC, INC.					
Principal Place of Business 2243 CAIRNS CT. ORLANDO, FL 32835			Mailing Address 20 N. SANTA CRUZ AVE. SUITE A LOS GATOS, CA 95030		
2. Principal Place of Business - No P.O. Box # 2243 CAIRNS CT.		3. Mailing Address 901 CAMPISI WAY Suite, Apt. #, etc. SUITE 205			
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 			
City & State ORLANDO, FL		City & State CAMPBELL, CA		4. FEI Number 20-1207282	
Zip 32835		Country 		Zip 95008	
Country 		Country 		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent JOHNSON, DAVID 2243 CAIRNS CT. ORLANDO, FL 32835				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 2243 CAIRNS CT. 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: DATE: 10/8/08					
FILE NOW!!! FEE IS \$150.00 Due by September 12, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D MARSHALL, BRIAN 37900 APIARY RD GRAND ISLAND, FL 32735		<input type="checkbox"/> Delete		
TITLE NAME STREET ADDRESS CITY - ST - ZIP			<input type="checkbox"/> Delete		
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TITLE NAME STREET ADDRESS CITY - ST - ZIP			<input type="checkbox"/> Delete		
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: DATE: 10/8/08					

10/15/08