

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000102251

FILED
Sep 06, 2006
Secretary of State

Entity Name: THE GIFT OF MUSIC, INC.

Current Principal Place of Business:

150 DELAND AVENUE
INDIALANTIC, FL 32903

New Principal Place of Business:

Current Mailing Address:

150 DELAND AVENUE
INDIALANTIC, FL 32903

New Mailing Address:

FEI Number: 20-3311267

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DEMITCHELL, DAVID
150 DELAND AVENUE
INDIALANTIC, FL 32903 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 () Delete
Name: MCMULLAN, MICHAEL
Address: 1723 MISSION BELL CIRCLE #102
City-St-Zip: ROCKLEDGE, FL 32955

Title: SD () Delete
Name: CIOPPA, LISA DELLA
Address: 150 DELAND AVENUE
City-St-Zip: INDIALANTIC, FL 32903

Title: TD () Delete
Name: CIOPPA, MICHAEL D
Address: 150 DELAND AVENUE
City-St-Zip: INDIALANTIC, FL 32903

Title: D (X) Delete
Name: DEMITCHELL, DAVID
Address: 150 DELAND AVENUE
City-St-Zip: INDIALANTIC, FL 32903

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: DEMITCHELL, DAVID
Address: 150 DELAND AVE
City-St-Zip: INDIALANTIC, FL 32903

Title: SD (X) Change () Addition
Name: MCMULLAN, MICHAEL
Address: 1723 MISSION BELL CIRCLE #102
City-St-Zip: ROCKLEDGE, FL 32955

Title: TD (X) Change () Addition
Name: MCMULLAN, MICHAEL
Address: 1723 MISSION BELL CIRCLE #102
City-St-Zip: ROCKLEDGE, FL 32955

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: DAVID DEMITCHELL

PD

09/06/2006

Electronic Signature of Signing Officer or Director

_____ Date