FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B Mortham

Secretary of State
DIVISION OF CORPORATIONS

1996

P93000031409 (4)

DOCUMENT #

| GREG'S MUSIC, INC. | |
|-----------------------------|-----------------|
| Principal Place of Business | Mailing Address |



| 940 8TH ST MW WINTER HAVEN FL 33881 | | 940 8TH ST NW Winter Haven FL 33881 | | | | | |
|--|--|--|--------------------------|---|---|---------------------------------------|--|
| | | | | | 3. Date Incorporated or Qualified 05/01/1993 | 3a. Date of Last Report 04/04/1995 | |
| Principal Place of Business 2a. Maling Address | | | ., | | 4. FEI Number | Applied For | |
| 21 | | 26 | | | 59-3193805 | Not Applicable | |
| Suite, Apt. | . #, etc. | Suite, Apt #, etc. | | 5. Certificate of Status Desired | \$8.75 Additional Fee Required | | |
| City & Sta | te | City & State | | Election Campaign Financing Trust Fund Contribution | \$5.00 May Be Added to Fees | | |
| Zip | Country | Zφ | Countr | ý | 8. This corporation has liability for i | | |
| 24 | 25 9. Name and Address of Curren | 29 | 30 | | Florida Statutes Yes 10. Name and Address of New R | | |
| | 9. Name and Address of Curren | registered Agent | 81 | Name | 10. Name and Address of New M | egistered Agent | |
| TOWLE, GREGORY G 940 8TH ST NW WINTER HAVEN FL 33881 | | | 82 | | Street Address (P.O. Box Number is Not Acceptable) | | |
| | | | 83 | i i | | | |
| | | | 84 | City | | FI 85 Zip Code | |
| 11 Burguant | t to the expulsions of Sections 607 0500 | and 607 1508 Florida Statu | ites the above | Lamed como | oration submits this statement for the pur | The Court is | |
| familiar v | with, and accept the obligations of, Secti | on 607.0505, Florida Statute | 3G. | | and of directors. Thereby accept the appoint | DATE | |
| 12. | OFFICERS AN | | 13. | | ADDITIONS/CHANGES TO OFF | · · · · · · · · · · · · · · · · · · · | |
| TITLE | TOWLE, GREGORY G | ☐ DELETE | 1.11016 | ļ | | ☐ Change ☐ Addition | |
| NAME | 940 8TH ST NW | | 1.2 NAME | 1 | | | |
| STREET ADDRESS | WINTER HAVEN FL 33881 | | | LADDRESS | | | |
| DITY-ST-ZIP | | DELETE | 1.4 CITY : 2 -1 TITLE | | | ☐ Change ☐ Addition | |
| NAME | | | 2.2 NAM | 1 | | <u> </u> | |
| STREET ADDRESS | | | 2.3 STHE | T ADDRESS | | | |
| CITY-ST-ZIP | | | 2.4 CITY | ST-ZIP | | | |
| TITLE | | ☐ DELETE | 3 1 THE | | | ☐ Change ☐ Addition | |
| NAME | | | 3.2 NAM | : | | | |
| STREET ADDRESS | 5 | | 3.3 STHE | ET ADDRESS | | | |
| CITY - ST - ZIP | | | 3 4 C(TY | | | ☐ Change ☐ Addition | |
| TITLE | | ☐ DELETE | 4.11/66 | | | Change Addition | |
| NAME | | | 4.2 NAM | E1 ADDRESS | | | |
| STREET ADDRESS | | | 4.4 CITY | | | | |
| CITY-ST-ZIP TITLE | | DELETE | 5 1 TITL | | | Change Addition | |
| NAME | | | 5.2 NAM | | | | |
| STREET ADDRESS | s | | 5.3 STRE | E1 ADDRESS | | | |
| CITY-ST-ZIP | | | 5.4 CITY | - ST - 7IP | | | |
| TITLE | | DELETE | 6 1 TH L | | | ☐ Change ☐ Addition | |
| NAME | | | 6 2 NAM | Ę . | | | |
| STREET ADDRESS | s | | | ET ADDRESS | | | |
| CHTY-ST-ZIP | | | 64 CITY | -ST-ZIP | | | |

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 13 if changed, or on an attachment with an address.

SIGNATURE:

SKNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-19-96

Dadine Phone #

R2E034 (12/95)