2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

Mar 03, 2005 08:00 AM Secretary of State DOCUMENT # P93000031409 1. Entity Name GREG'S MUSIC, INC. Mailing Address Principal Place of Business 940 8TH ST NW 3800 HWY 98 NORTH WINTER HAVEN, FL 33881 SUITE 500 US. LAKELAND, FL 33809 CR2E034 (10/03) 02012005 No Cha-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3193805 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE TOWLE, GREGORY G 940 8TH ST NW WINTER HAVEN, FL 33881 IN THIS SPACE 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, typed or printed name of registered agent and little if applicable (NOTE Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE TOWLE, GREGORY G NAME. STREET ADDRESS 940 8TH ST NW WINTER HAVEN, FL 33881 CITY-ST-ZIP TITLE NAME. STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.

CITY - ST - 7IP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED