**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # **P94000022077**

1. Corporation Name

LIBERTY	MUSIC, INC.								
Principal Place	e of Business	Mailing Address					3118 (1818 11811	***************************************	
1303 GREEN COVE ROAD WINTER PARK FL 32789 US  1303 GREEN COVE ROAD WINTER PARK FL 32789 US						DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualifed			
						03/22/1994		<del></del>	
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number	L	Applied For	
21		26				59-3233761		Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired   \$8.75 Additional Fee Required			
	City & State City & State					6. Election Campaign Financing Trust Fund Contribution	*		
Zip	Country 25	Zip 30	Countr	гу		This corporation owes the current year     Personal Property Tax.	r Intangible	_	
<del>[29</del> ]	9. Name and Address of Current Registered Agent				_	10. Name and Address of New Register	red Agent		
HUMPHRIES, J. GREGORY 20 N ORANGE AVE STE 1000 ORLANDO FL 32801				2 S		ess (P.O. Box Number is Not Acceptable)	85	Zip Code	
				4	ity	i		Zip Code	
l office or r	egistered agent, or both, in the State on familiar with, and accept the obligation	of Florida. Such change was autr lions of, Section 607.0505, Florid	orized by a Statute	y the is.	corporation	ration submits this statement for the purposits board of directors. I hereby accept the ap	opoiniment a	ng its registered as registered	
digitalist types at printed and a registrate agents at a printed agents and a registrate agent agent agents agent ag				ent sig	nature required s	when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS	<u> </u>	ECTOPS IN 12	
12.	OFFICERS AND DIRECTORS  Delete								
TITLE	DP	□ nehele	1.1 TITLE						
NAME	DEVITTO, LIBERTY		1.2 NAME						
STREET ADDRESS	1303 GREEN COVE ROAD		1.3 STREI						
CITY-ST-ZIP	WINTER PARK FL		1.4 CITY-		<u>-</u>		Cha	ange	
TITLE	ST	☐ DELETE	2.1 TITLE				€_) CH	ange ( Addition	
NAME	DEVITTO, MARY B.	•	2.2 NAME	Ē	ì				

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445 March 6.4 CITY-ST-ZIP CITY-ST-ZIP: 4 14. 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 annual report of 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

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.4, CITY-ST-ZIP

4.3 STREET ADDRESS

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6.2 NAME

SIGNATURE:

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Apr 30, 1999 8:00 am Secretary of State

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