## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT # P95000000719

CHAMBER MUSIC MANAGEMENT, INC.



**FILED** Feb 16, 2006 08:00 AM Secretary of State

Principal Place of Business

P.O. BOX 880132 **BOCA RATON, FL 33488**  Mailing Address

P.O. BOX 880132 BOCA RATON, FL 33488



DO N	IOT	WRITE	IN	THIS	SPACE
		7 T 1 X 1 L	11.3		

SIGNATURE AND TYPED OR PRINTED RAMP OF SIGNING OFFICER OR DIRECTOR

6. Name and Address of Current Registered Agent

01072008	No Chg-P	CR2E034 (11/05)		
4. FEI Number		Applied Far		
<u>65-05</u> 44	696	Not Applicable		

5. Certificate of Status Desired

\$8.75 Additional Fee Required

STANLEY, BRIAN

9745 MAJORCA PLACE BOCA RATON, FL 33434

SIGNATURE: \_

## DO NOT WRITE IN THIS SPACE

8. The above the obligat	named entity submits this statement for the paions of registered agent.	urpose of changing its registere	d office or r	egistered agent, or bo	ith, in the State of Fforida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and title t	applicable (NOTE Registered	Agent aigneture	s required when reinstating)	DATE
*****		Election Campaign Financ Trust Fund Contribution.			
10.	OFFICERS AND DIREC	TORS	ſ		
TITLE HAME STREET ADDRESS CITY-ST-ZIP	P STANLEY, BRIAN 9745 MAJORCA PLACE BOCA RATON, FL 33434				
TOTLE NAME STREET ADDRESS CITY-ST-ZIP					UAAAAAA A2/28/06-8003 <b>5-0</b> 03 <b>150.00</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE MAIME STREET ADDRESS CITY-ST-ZIP				IN .	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
12. I hereby of indicated of the corrections of the	certily that the information supplied with this fit on this report or supplemental report is true a poration or the receiver or trustee empowered or on an attachment with an address, with all	ing does not qualify for the exer nd accurate and that my signatu to execute this report as require other like empowered.	reptions con the shall har and by Chap	ntained in Chapter 118 ve the same legal effecter 607, Florida Statute	9. Florida Statutes, I further certify that the Information of as if made under cath; that I am an officer or director as; and that my name appears in Block 10 or Block 11 if