

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Murdham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000001517 (8)

1. Corporation Name

LAST CHANCE RECORDS, INC.



Principal Place of Business

1842 JACLIFF COURT
TALLAHASSEE FL 32308

Mailing Address

1842 JACLIFF COURT
TALLAHASSEE FL 32308

2. Principal Place of Business

2a. Mailing Address

21 3845-1 Killearn Court

26 3845-1 Killearn Court

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23 Tallahassee, Florida

28 Tallahassee, Florida

Zip

Zip

Country

Country

24 32308

25 US

29 32308

30 US

9. Name and Address of Current Registered Agent

DOUSO, MICHAEL L
* 1842 JACLIFF COURT
TALLAHASSEE FL 32308

3. Date Incorporated or Qualified

01/06/1995

3a. Date of Last Report

4. FEI Number

59-3287186

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes. ☐ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name

Claire A. Duchemin

82 Street Address (P.O. Box Number is Not Acceptable)

3845-1 Killearn Court

83

84 City

Tallahassee

FL

85 Zip Code

32308

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

Claire A. Duchemin

3/26/96

12. OFFICERS AND DIRECTORS

TITLE
NAME
D
DOUSO, MICHAEL L
STREET ADDRESS
1842 JACLIFF COURT
CITY, ST, ZIP
TALLAHASSEE FL 32308

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

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NAME
STREET ADDRESS
CITY, ST, ZIP

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

13.

1. TITLE
NAME
D
Claire A. Duchemin
STREET ADDRESS
3845-1 Killearn Court
CITY, ST, ZIP
Tallahassee, FL 32308

2. TITLE
NAME
D
Lewis L. Walker
STREET ADDRESS
3845-1 Killearn Court
CITY, ST, ZIP
Tallahassee, FL 32308

3. TITLE
NAME
D
Michael P. Brawer
STREET ADDRESS
3845-1 Killearn Court
CITY, ST, ZIP
Tallahassee, FL 32308

4. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

5. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

6. TITLE
NAME
STREET ADDRESS
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)(g), 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 or empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 of original or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Michael L. Dawo

2/15/96 944-877-5885
SG 328-96

CR2E034 (12/95)