

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P96000029349

FILED  
Apr 25, 2002 8:00 AM  
Secretary of State

Entity Name: MUSIC DEPOT OF JACKSONVILLE, INC.

## Current Principal Place of Business:

5950-1 RAMONA BLVD  
JACKSONVILLE, FL 32205

## New Principal Place of Business:

## Current Mailing Address:

5950-1 RAMONA BLVD  
JACKSONVILLE, FL 32205

## New Mailing Address:

FEI Number: 59-3014404

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DYAL, PAUL B  
6858 OLD KINGS RD. N.  
JACKSONVILLE, FL 32219

## Name and Address of New Registered Agent:

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: VP ( ) Delete  
Name: DYAL, DARRIN B  
Address: 6318 OLD KINGS RD N  
City-St-Zip: JACKSONVILLE, FL 32254

Title: SVP ( ) Delete  
Name: DYAL, SHAWN B  
Address: 6330 OLD KINGS RD N  
City-St-Zip: JACKSONVILLE, FL 32254

Title: PCEO ( ) Delete  
Name: DYAL, PAUL  
Address: 6350 OLD KINGS RD N  
City-St-Zip: JACKSONVILLE, FL 32254

Title: VPST ( ) Delete  
Name: HAQICCIA, DONALD  
Address: 10851 COLORADO SPRINGS AVE  
City-St-Zip: JACKSONVILLE, FL 32219

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VPST (X) Change ( ) Addition  
Name: LARICCIA, DONALD  
Address: 10851 COLORADO SPRINGS AVE  
City-St-Zip: JACKSONVILLE, FL 32219

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DONALD LARICCIA

VPST

04/25/2002

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date