

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 09, 2006 8:00 am
Secretary of State

05-09-2006 90089 045 ***150.00

DOCUMENT # P96000048047

1. Entity Name

PLAY IT AGAIN SAM'S PIANOS & ORGANS, INC.

dba Piano Depot



Principal Place of Business

~~124 N. NOVA ROAD~~
~~ORMOND BEACH FL 32174~~
US

1094 FLORIAN ST
HOOLY HILL, FL 32117

Mailing Address

~~124 N. NOVA ROAD~~
~~ORMOND BEACH FL 32174~~

1094 FLORIAN ST
HOOLY HILL, FL 32117

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3385321

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

1st MOORE

CR2E034 (10/05)



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

YOUNG, HERBERT A II
1546 POPLAR DRIVE
ORMOND BEACH FL 32174

new
↓



Herbert Young
580 Leeway Trl
Ormond Beach, FL 32174

Name

dba Piano Depot

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

1094 Florian St

City

Holly Hill

FL

Zip Code

32117

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reconstituting)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2006 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PT	<input type="checkbox"/> Delete
NAME	YOUNG, HERBERT A	
STREET ADDRESS	<i>1546 POPLAR DRIVE</i>	<i>580 Leeway Trail</i>
CITY-ST-ZIP	<i>ORMOND BEACH FL 32174</i>	<i>ORMOND BEACH, FL 32174</i>
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
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TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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.

SIGNATURE:

[Signature]

4/19/2006 386-673-359