

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 21, 2006 08:00 AM
Secretary of State

DOCUMENT # P96000099711					
1. Entity Name SCHMIDT'S MUSIC, INC.					
Principal Place of Business 105 NORTH PALAFOX STREET PENSACOLA FL 32501 US			Mailing Address 105 NORTH PALAFOX STREET PENSACOLA FL 32501 US		
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 59-3436975	
				Applied For ☐ Not Applied	
				5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
SCHMIDT, DAVID H 105 NORTH PALAFOX STREET PENSACOLA FL 32501				Name	
				Street Address (P.O. Box Number is Not Acceptable)	
				City	
				FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when re-appointing) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee Will Be \$550.00 Make Check Payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	DP	☐ Delete	TITLE		☐ Change ☐ Add
NAME	SCHMIDT, DAVID H		NAME		
STREET ADDRESS	14945 INNERARITY PT RD		STREET ADDRESS		
CITY- ST- ZIP	PENSACOLA FL		CITY- ST- ZIP		
TITLE	DST	☐ Delete	TITLE		☐ Change ☐ Add
NAME	SCHMIDT, REBECCA L		NAME		
STREET ADDRESS	14945 INNERARITY PT RD		STREET ADDRESS		
CITY- ST- ZIP	PENSACOLA FL		CITY- ST- ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Add
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY- ST- ZIP			CITY- ST- ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Add
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STREET ADDRESS			STREET ADDRESS		
CITY- ST- ZIP			CITY- ST- ZIP		



1st MOORE CR2E034 (10/05)

59-3436975 Applied For
Not Applied

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

**SCHMIDT, DAVID H
105 NORTH PALAFOX STREET
PENSACOLA FL 32501**

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

FL Zip Code

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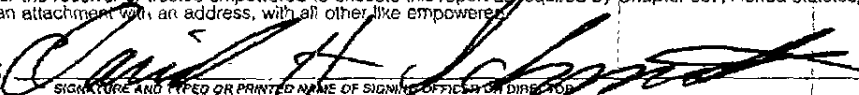
FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Added to Fee**

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CITY- ST- ZIP			CITY- ST- ZIP		

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05/03/06-80039-002 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemption 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: 

Date _____ Daytime Phone # _____