

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000002049

**FILED**  
**Feb 16, 2011**  
**Secretary of State**

**Entity Name:** CENTRAL FLORIDA MUSIC TEACHERS ASSN., INC.

**Current Principal Place of Business:**

109 GUM STREET  
ALTAMONTE SPRINGS, FL 32714

**New Principal Place of Business:**

**Current Mailing Address:**

109 GUM STREET  
ALTAMONTE SPRINGS, FL 32714

**New Mailing Address:**

**FEI Number:** 59-1897359

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

GUREVICH, ZALINA MRS.  
109 GUM STREET  
ALTAMONTE SPRINGS, FL 32714 US

**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

**OFFICERS AND DIRECTORS:**

Title: CD  
Name: MCLEAN, ANNE DR.  
Address: 774 TERRA PLACE  
City-St-Zip: MAITLAND, FL 32751

Title: PD  
Name: TSCHANZ, CHERYL DR.  
Address: 647 MULBERRY AVENUE  
City-St-Zip: CELEBRATION, FL 34747

Title: SD  
Name: TEMPLETON, BRETT MR.  
Address: 7043 PASTURELANDS PLACE  
City-St-Zip: WINTER GARDEN, FL 34787

Title: S  
Name: FLORY, BETTINA MRS.  
Address: 9100 PHILLIPS GROVE TERRACE  
City-St-Zip: ORLANDO, FL 32836

Title: TD  
Name: GUREVICH, ZALINA MRS.  
Address: 109 GUM STREET  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ANNE MCLEAN

CD

02/16/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date