

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000002049

FILED
Feb 12, 2012
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:

647 MULBERRY AV
CELEBRATION, FL 34747

Current Mailing Address:

109 GUM STREET
ALTAMONTE SPRINGS, FL 32714

New Mailing Address:

647 MULBERRY AV
CELEBRATION, FL 34747

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:

TSCHANZ, CHERYL
647 MULBERRY AV
CELEBRATION, FL 34747 US

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: CHERYL TSCHANZ

02/12/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CD
Name: TSCHANZ, CHERYL
Address: 647 MULBERRY AV
City-St-Zip: CELEBRATION, FL 34747

Title: PD
Name: SHACKELFORD, NANCY
Address: PO BOX 1116
City-St-Zip: OAKLAND, FL 34760

Title: SD
Name: BETANCES, ELLEN
Address: 760 TRANQUIL TRAIL
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: CHERYL TSCHANZ

CD

02/12/2012

Electronic Signature of Signing Officer or Director

Date