

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **N44766** (6)

1. Corporation Name

TREASURE COAST MUSIC TEACHERS ASSOCIATION, INC.



Principal Place of Business

Mailing Address

1608 S. KANNER HWY.
STUART FL 34994

1608 S. KANNER HWY.
STUART FL 34994

3. Date Incorporated or Qualified
08/19/1991

3a. Date of Last Report
07/05/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

~~GROSS, JOANN
1608 S. KANNER HWY.
STUART FL 34994~~

81 Name

Jeanie Menninger

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

2218 S.W. Waterview Pl.

83

84 City

Palm City

FL

85 Zip Code

34990

11. Pursuant to the provisions of Sections 617.0502 and 617.1502, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Jeanie Menninger

(Printed Name of Registered Agent) (Signature of Registered Agent)

4/26/96

DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	☒ DELETE
NAME	GROSSO, JOANN	
STREET ADDRESS	1608 S. KANNER HWY	
CITY-ST-ZIP	STUART FL 34994	
TITLE	VPD	☒ DELETE
NAME	KESSLER, CYNTHIA	
STREET ADDRESS	2060 S.W. WOODSIDE WAY	
CITY-ST-ZIP	PALM CITY FL 34990	
TITLE	SD	☒ DELETE
NAME	HENDERSHOT, SUE	
STREET ADDRESS	774 BROOKEDGE AVE.	
CITY-ST-ZIP	PT. ST. LUCIE FL 34983	
TITLE	TD	☒ DELETE
NAME	DAVIS, JOY	
STREET ADDRESS	1608 S. KANNER HWY	
CITY-ST-ZIP	STUART FL 34994	
TITLE	DP	☒ DELETE
NAME	GROSSO, JO ANN	
STREET ADDRESS	1608 S. KANNER HWY	
CITY-ST-ZIP	STUART FL 34994	
TITLE	DS	☒ DELETE
NAME	HENDERSHOT, SUE	
STREET ADDRESS	774 BROOKEDGE AVENUE	
CITY-ST-ZIP	PORT ST. LUCIE FL 34983	

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PD	☒ Change ☐ Addition
1.2 NAME	Menninger, Jeanie	
1.3 STREET ADDRESS	2218 SW Waterview Pl	
1.4 CITY-ST-ZIP	Palm City, FL 34990	
2.1 TITLE	VPD	☒ Change ☐ Addition
2.2 NAME	Gallup, Jean	
2.3 STREET ADDRESS	1490 Colorado Ave.	
2.4 CITY-ST-ZIP	Stuart, FL 34994	
3.1 TITLE	SD	☒ Change ☐ Addition
3.2 NAME	Lenit, Sydney	
3.3 STREET ADDRESS	629 St. Lucie Crescent	
3.4 CITY-ST-ZIP	Stuart, FL 34994	
4.1 TITLE	TD	☒ Change ☐ Addition
4.2 NAME	Rosa, Bobbie	
4.3 STREET ADDRESS	1608 S. Kanner Hwy	
4.4 CITY-ST-ZIP	Stuart, FL 34994	
5.1 TITLE	DP	☒ Change ☐ Addition
5.2 NAME	Menninger, Jeanie	
5.3 STREET ADDRESS	2218 SW Waterview Pl	
5.4 CITY-ST-ZIP	Palm City, FL 34990	
6.1 TITLE	DS	☒ Change ☐ Addition
6.2 NAME	Lenit, Sydney	
6.3 STREET ADDRESS	629 St. Lucie Crescent	
6.4 CITY-ST-ZIP	Stuart, FL 34994	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Jeanie Menninger
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/26/96

DATE

(407) 220-2224

DAY TELEPHONE

CR2E037 (12/95)