2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000003685

Entity Name: FLORIDA STATE FIDDLERS ASSOCIATION, INC.

Current Principal Place of Business:

397 KIM'S LANE
LAMONT, FL 32336

Current Mailing Address:

FLORIDA STATE FIDDLERS ASSOCIATION, INC.
P.O. BOX 13986
TALLAHASSEE, FL 32317 US

FEI Number: 59-2231679

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

VAN TREESE, THOMAS
397 KIM'S LANE
LAMONT, FL 32336 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: THOMAS VAN TREESE   01/28/2016

Electronic Signature of Registered Agent   Date

Officer/Director Detail :

Title	PRES		Title	TREA
Name	WHISLER, CAROL		Name	VAN-TREESE, TOM
Address	3047 SILVER PALM DR		Address	FLORIDA STATE FIDDLERS ASSOCIATION, INC. P.O. BOX 13986
City-State-Zip:	EDGEWATER FL 32141		City-State-Zip:	TALLAHASSEE FL 32317
Title	SEC		Title	MEMBERSHIP COORDINATOR
Name	MURPHY, BOB		Name	VAN-TREESE, KAY
Address	4400 NW 4TH COURT		Address	FLORIDA STATE FIDDLERS ASSOCIATION, INC. P.O. BOX 13986
City-State-Zip:	COCONUT CREEK FL 33066		City-State-Zip:	TALLAHASSEE FL 32317

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: KAY VAN-TREESE   MEMBERSHIP COOR.   01/28/2016

Electronic Signature of Signing Officer/Director Detail   Date