

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000005104

FILED
Mar 17, 2016
Secretary of State
CC3856778282

Entity Name: THE PERLMAN MUSIC PROGRAM/SUNCOAST, INC.

Current Principal Place of Business:

6325 N. TAMIAMI TRAIL
110
SARASOTA, FL 34243

Current Mailing Address:

PO BOX 3407
SARASOTA, FL 34230

FEI Number: 26-2714384

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

POWER, ELIZABETH E.
6325 N. TAMIAMI TRAIL
110
SARASOTA, FL 34243 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: ELIZABETH POWER

03/17/2016

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CHAIR
Name RITTER, MICHAEL
Address 8322 ABINGDON COURT
City-State-Zip: UNIVERSITY PARK FL 34201

Title TREASURER
Name ISRAELOFF, ROBERT
Address 455 LONGBOAT CLUB RD.
City-State-Zip: LONGBOAT KEY FL 34228

Title SECRETARY
Name CHAIFETZ, EDIE
Address 35 WATERGATE DRIVE
APT. 1405
City-State-Zip: SARASOTA FL 34236

Title VC-ADMINISTRATION
Name DAVIS, IRWIN
Address 12505 THORNHILL COURT
City-State-Zip: LAKEWOOD RANCH FL 34202

Title VC-DEVELOPMENT
Name GAST, THEODORE
Address 4625 KINGSMERE
City-State-Zip: SARASOTA FL 34235

Title VC-EDUCATION
Name DAVIS-COTTON, DENISE DR.
Address 7536 ASCOT COURT
City-State-Zip: UNIVERSITY PARK FL 34201

Title EXECUTIVE DIRECTOR
Name POWER, ELIZABETH
Address 6419 MEANDERING WAY
City-State-Zip: LAKEWOOD RANCH FL 34202

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: ELIZABETH POWER

EXECUTIVE DIRECTOR

03/17/2016

Electronic Signature of Signing Officer/Director Detail

Date