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: FREDERICK R SCHIFF	CHMN	01/23/2017		

Title	CD	Title	D
Name	SCHIFF, FREDERICK	Name	SCHIFF, MELVIN
Address	8136 N. UNVERITY DRIVE	Address	8136 N. UNIVERSITY DRIVE
City-State-Zip:	TAMARAC FL 33321	City-State-Zip:	TAMERAC FL 33321
Title	STD		
Title	STD		
Name	SCHIFF, JODY		
Address	8136 N. UNIVERSITY DRIVE		
City-State-Zip:	TAMRAC FL 33321		

Officer/Director Detail :

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

8136 UNIVERSITY DR TAMARAC, FL 33321

DOCUMENT# N47928

Current Mailing Address:

Current Principal Place of Business:

8136 UNIVERSITY DR TAMARAC. FL 33321

FEI Number: 65-0339918

Name and Address of Current Registered Agent:

FREDERICK, SCHIFF 8136 UNIVERSITY DR TAMARAC, FL 33321 US



Entity Name: ALL COUNTY MUSIC SCHOLARSHIP FOUNDATION, INC.

FILED Jan 23, 2017 Secretary of State CC7775282310

Certificate of Status Desired: No

Electronic Signature of Signing Officer/Director Detail

Date