#### 2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000002903

Entity Name: SOUTH FLORIDA MUSICIANS' ASSOCIATION, LOCAL 655, INC.

**FILED** Jan 02, 2018 **Secretary of State** CC5132988303

Date

### **Current Principal Place of Business:**

1915 NE 45TH ST SUITE 105 FORT LAUDERDALE. FL 33308

#### **Current Mailing Address:**

1915 NE 45TH ST SUITE 105 FORT LAUDERDALE. FL 33308 US

FEI Number: 59-0358930 Certificate of Status Desired: No

#### Name and Address of Current Registered Agent:

RESKIN, CHARLES 1915 NE 45TH ST SUITE 105 FORT LAUDERDALE, FL 33308 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: CHARLES RESKIN 01/02/2018

Electronic Signature of Registered Agent

Officer/Director Detail:

Title Title D

APANA, JEFFREY DIXON, KAREN Name Name 1609 NE 17 ST 404 SE 15 ST Address Address

City-State-Zip: FORT LAUDERDALE FL 33316 FORT LAUDERDALE FL 33305 City-State-Zip:

Title DIRECTOR Title **PRESIDENT** 

Name ARON, ELIZABETH Name RESKIN, CHARLES

Address 404 SE 15 ST Address 404 SE 15 ST

FORT LAUDERDALE FL 33316 City-State-Zip: City-State-Zip: FORT LAUDERDALE FL 33316

Title VP Title **DIRECTOR** 

Name VAN ECK, IRIS Name KLEIMAN, CAREY Address 517 NE 13 AVE Address 5846 SOUTH FLAMINGO RD #354

City-State-Zip: FORT LAUDERDALE FL 33301 COOPER CITY FL 33330 City-State-Zip:

Title DIRECTOR Title DIRECTOR COREY, MATT Name BRAVO, RICHARD Name

1915 NE 45TH ST SUITE 105 Address Address PO BOX 127626 City-State-Zip: FORT LAUDERDALE FL 33308

City-State-Zip: HIALEAH FL 33012-3188

## Continues on page 2

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: JEFFREY APANA

SECRETARY-TREASURER 01/02/2018

Electronic Signature of Signing Officer/Director Detail

Date

# Officer/Director Detail Continued:

Title DIRECTOR
Name FOLSE, BOB

Address 1915 NE 45TH ST SUITE 105
City-State-Zip: FORT LAUDERDALE FL 33308