

2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Jun 26, 2012
Secretary of State

DOCUMENT# 742642

Entity Name: FORT MYERS COMMUNITY CONCERT ASSOCIATION, INC.**Current Principal Place of Business:**17281 BRENFIELD LANE
ALVA, FL 33920 US**New Principal Place of Business:****Current Mailing Address:**P.O. BOX 606
FT. MYERS, FL 33902 US**New Mailing Address:****FEI Number:** 59-1739068**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**KATHLEEN HOLLOWAY
2902 HOLLY ROAD
FT MYERS, FL 33901 US**Name and Address of New Registered Agent:**

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

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: MANN, MARY LEE
Address: 17281 BRENFIELD LANE
City-St-Zip: ALVA, FL 33920

Title: D
Name: FASSETT, JOHN B
Address: 1040 N. TOWN AND RIVER DRIVE
City-St-Zip: FT MYERS, FL 33919

Title: TD
Name: HALL, DAVID C
Address: 9930 VIA SAN MARCO LOOP
City-St-Zip: FT MYERS, FL 33905

Title: SD
Name: TYRER, JOHN L
Address: 1353 KINGSWOOD CT
City-St-Zip: FT MYERS, FL 33919

Title: D
Name: MANN, BARBARA
Address: 3934 W RIVERSIDE DR
City-St-Zip: FT MYERS, FL 00000, FL 33901

Title: VPD
Name: HOLLOWAY, KATHLEEN
Address: 2902 HOLLY ROAD
City-St-Zip: FT. MYERS., FL 33901

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: KATHLEEN HOLLOWAY

VPD

06/26/2012

Electronic Signature of Signing Officer or Director

Date