FILED

2001 UNIFORM BUSINESS REPORT (UBR)

Sep 06, 2001 8:00 am Secretary of State DOCUMENT # N0000006699 1. Entity Name 06-20-2001 90001 047 ****61.25 FORT MYERS MUSIC TEACHERS ASSOCIATION, INC. Principal Place of Business Mailing Address 6861 ST. EDMUNDS LOOP 6861 ST. EDMUNDS LOOP FT. MYERS FL 33912 FT. MYERS FL 33912 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 060294 Not Applicable Zip Country Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) SEAL, MARY G 6861 ST. EDMUNDS LOOP FT. MYERS FL 33912 Zip Code City FL 8. 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** Signature, based or printed name of registered agent and title if applicable. DATE (NOTE: Registered Agent signature required when reinstating) 9#Election Campaign Financing Make Check Payable to FILE NOW: \$5.00 May Be : *Trust Fund Contribution. Department of State FEE IS \$61.25 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. PRESIDENT 3R2E037 (10/00) ☐ Addition TITLE ☐ Delete TITLE D Change ETSY DUNCAN RANDOLPH DE CALADIUM RD. SE NAME NAME. STREET ADORESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP . WYERS PRESIDENT Change ☐ Addition VIEE-☐ Delete TITLE TITLE NAME JOANNE A. SMITH NAMÉ STREET ADDRESS STREET ADDRESS 9451 TRANQUIL 3*4/3*5 CITY-ST-ZIP CITY-ST-ZIP 2Nd VICE- PRESIDENT ☐ Addition DK Change TITLE Delete TITLE NAME SHAFFER JULIE NAME 758 109 K A STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP <u> 34108</u> NAPLES Change ☐ Addition TITLE ☐ Delete TITLE DUNFCE NAME NAME RLES ST. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Change ☐ Addition TITLE ☐ Delete TITLE. NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Addition TITLE NAME NAME STREET ADDRESS STREET ACCRESS CITY-ST-ZIP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(3Xi), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if

changed, or on an attachment with an address

SIGNATURE:

AHACLMENT 12695 HN00000006699

August 29, 2001

To Whom it May Concern:

This letter is not within 30 days of the date received because I was away on an extended trip, and only received it this week. As instructed, I have indicated who the directors and trustees are with a "D" or "T" next to their names. Please let me know immediately if there are any problems with this report at 6861 St. Edmunds Loop, Ft. Myers, FL 33912 or by e-mail at seeal@iline.com.

Sincerely,

Mary Griffin Seal=

Director, Ft. Myers Music Teachers Association