

# 2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N03000007589

FILED  
Dec 03, 2005  
Secretary of State

**Entity Name:** KEYBOARD MUSIC EDUCATORS ASSOCIATION OF MIAMI-DADE COUNTY, INC.

**Current Principal Place of Business:**

77 N.W. 105TH STREET  
MIAMI SHORES, FL 33150

**New Principal Place of Business:**

**Current Mailing Address:**

77 N.W. 105TH STREET  
MIAMI SHORES, FL 33150

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

CAVES, ALAN  
77 N.W. 105 ST  
MIAMI SHORES, FL 33150 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: ALAN CAVES

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: CAVES, ALAN  
Address: 77 N.W. 105TH STREET  
City-St-Zip: MIAMI SHORES, FL 33150

Title: D ( ) Delete  
Name: HARWOOD, SANDY  
Address: 8527 OLD COUNTRY MANOR #504  
City-St-Zip: DAVIE, FL 33328

Title: D ( ) Delete  
Name: STUART, ANN  
Address: 2635 HILOLA STREET  
City-St-Zip: COCONUT GROVE, FL 331533

Title: D ( ) Delete  
Name: RUTLEDGE, KEVIN  
Address: 7531 BILTMORE BLVD  
City-St-Zip: MIRAMAR, FL 33023

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ALAN CAVES

Electronic Signature of Signing Officer or Director

DIR.

12/03/2005

Date