

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17200

FILED
Mar 05, 2009
Secretary of State

Entity Name: ALL-AMERICAN EDUCATIONAL MUSIC ASSOCIATION, INC.

Current Principal Place of Business:

8651 COMMODITY CIRCLE
ORLANDO, FL 32819

New Principal Place of Business:

Current Mailing Address:

8651 COMMODITY CIRCLE
ORLANDO, FL 32819

New Mailing Address:

FEI Number: 59-2724621

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEFKOWITZ, IVAN M
430 NORTH MILLS AVENUE
ORLANDO, FL 32803 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: PST () Delete
Name: LINER, LAWRENCE J.,
Address: 6005 LEXINGTON PARK
City-St-Zip: ORLANDO, FL

Title: D () Delete
Name: LINER, ROBYN G.,
Address: 6005 LEXINGTON PARK
City-St-Zip: ORLANDO, FL

Title: D () Delete
Name: LINER, R E
Address: 6005 LEXINGTON PK
City-St-Zip: ORLANDO, FL 32819

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:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: LAWRENCE LINER

PST

03/05/2009

Electronic Signature of Signing Officer or Director

Date