

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N43628

FILED
Apr 24, 2007
Secretary of State

Entity Name: THE MUSIC FOUNDATION OF SOUTHWEST FLORIDA, INC.

Current Principal Place of Business:

13235 WINSFORD LANE
FORT MYERS, FL 33912

New Principal Place of Business:

13235 WINSFORD LANE
FORT MYERS, FL 33966

Current Mailing Address:

13300-56 S. CLEVELAND AVENUE
PMB-214
FORT MYERS, FL 33907

New Mailing Address:

FEI Number: 65-0264107 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

PALUMBO, MARY V
7980 SUMMERLIN LAKES DR.
STE. 200
FORT MYERS, FL 33907 US

Name and Address of New Registered Agent:

PALUMBO, MARY V
6810 PORTOFINO CIRCLE
FORT MYERS, FL 33912 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:

04/24/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CHRISTMAN, RUTH
Address: 13235 WINSFORD LANE
City-St-Zip: FORT MYERS, FL 33912

Title: CD () Delete
Name: BIRELEY, FRANK
Address: 5000 HARBORTOWN LANE
City-St-Zip: FORT MYERS, FL 33919

Title: D (X) Delete
Name: BORN, BARBARA
Address: 4140 STEAMBOAT BEND E., #103
City-St-Zip: FORT MYERS, FL 33919

Title: D () Delete
Name: STEGER, MAUREEN
Address: 13353 BROADHURST LOOP
City-St-Zip: FORT MYERS, FL 33919

Title: TD () Delete
Name: KLAAS, JOHN
Address: 12761 YACHT CLUB CIRCLE
City-St-Zip: FORT MYERS, FL 33919

Title: D () Delete
Name: FLORY, CHUCK
Address: 4513 ORANGE GROVE BLVD
City-St-Zip: NORTH FORT MYERS, FL 33903

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CHRISTMAN, RUTH
Address: 13235 WINSFORD LANE
City-St-Zip: FORT MYERS, FL 33966

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

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

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City-St-Zip:

Title: () Change () Addition
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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 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: RUTH CHRISTMAN

P

04/24/2007

Electronic Signature of Signing Officer or Director

Date