



# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED

Jan 27, 2005 08:00 AM  
Secretary of State

<b>DOCUMENT # N47875</b>				
1. Entity Name <b>MANATEE COUNTY MUSIC TEACHERS ASSOCIATION, INC.</b>				
Principal Place of Business <b>3105 SOUTHERN PKWY. W. BRADENTON FL 34205 US</b>		Mailing Address <b>3105 SOUTHERN PKWY. W. BRADENTON FL 34205 US</b>		
2. Principal Place of Business Suite, Apt #, etc.		3. Mailing Address Suite, Apt #, etc.		
City & State		City & State		
Zip	Country	Zip	Country	
4. FEI Number <b>65-0341837</b>				Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>				<b>\$8.75</b> Additional Fee Required
6. Name and Address of Current Registered Agent  <b>BJORKLUND, NANCY MRS. 1912 48TH ST. W. BRADENTON FL 34209</b>				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code

1st MOORE

CR2E037 (10/04)

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. I am familiar with, and accept the obligations of registered agent

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25  
Due By May 1, 2005**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>S</b> <b>WEBB, MARY P</b> <b>4807 TURTLE BAY TER</b> <b>BRADENTON FL 34203</b>	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>01/28/05-80013-807 61.25</b>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>TD</b> <b>ZANDSTRA, GERALDINE R</b> <b>3105 SOUTHERN PKWY W</b> <b>BRADENTON FL 34205</b>	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>PD</b> <b>DILLON, ELIABETH</b> <b>8504 36TH AVE E</b> <b>PALMETTO FL 34221</b>	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>TMC</b> <b>VARNADORE, EILEEN</b> <b>2310 8TH ST W</b> <b>PALMETTO FL 34221</b>	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>VD</b> <b>MASON, JAN</b> <b>7407 21ST AVE NW</b> <b>BRADENTON FL 34209</b>	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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, with all other like empowered.

SIGNATURE:

*Geraldine R. Zandstra*  
**Geraldine R. Zandstra**

**1/21/05 746-2059**