

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000001685

FILED
Feb 04, 2004
Secretary of State

Entity Name: FLORIDA SCHOOL MUSIC ASSOCIATION, INCORPORATED

Current Principal Place of Business:

207 OFFICE PLAZA DRIVE
TALLAHASSEE, FL 32301 US

New Principal Place of Business:

Current Mailing Address:

207 OFFICE PLAZA DRIVE
TALLAHASSEE, FL 32301 US

New Mailing Address:

FEI Number: 52-2092192

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PERRY, JAMES T
207 OFFICE PLAZA DRIVE
TALLAHASSEE, FL 32301 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: P/D () Delete
Name: ROSER, LYNDIA
Address: 915 HILLCREST LANE
City-St-Zip: TALLAHASSEE, FL 32308

Title: D () Delete
Name: ROGER, DEARING
Address: 1990 25TH STREET
City-St-Zip: VERO BEACH, FL 32960

Title: V/D () Delete
Name: REYNOLDS, JEANNE
Address: 301 4TH STREET, SW
City-St-Zip: LARGO, FL 33779

Title: M () Delete
Name: PERRY, JAMES T
Address: 207 OFFICE PLAZA DRIVE
City-St-Zip: TALLAHASSEE, FL 32301

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: JAMES T. PERRY

M

02/04/2004

Electronic Signature of Signing Officer or Director

Date