

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000001685

FILED
Apr 30, 2009
Secretary of State

Entity Name: FLORIDA SCHOOL MUSIC ASSOCIATION, INCORPORATED

Current Principal Place of Business:

402 OFFICE PLAZA
TALLAHASSEE, FL 32301 US

New Principal Place of Business:

Current Mailing Address:

402 OFFICE PLAZA
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
402 OFFICE PLAZA
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: LEWIS, DAVID
Address: 915 HILLCREST LANE
City-St-Zip: LAKELAND, FL 33831

Title: D () Delete
Name: ROGER, DEARING
Address: 215 MANATEE AVENUE WEST
City-St-Zip: BRADENTON, FL 34205

Title: D () Delete
Name: REYNOLDS, JEANNE
Address: 2164 HARTFORD WAY
City-St-Zip: CLEARWATER, FL 33763

Title: M () Delete
Name: PERRY, JAMES T
Address: 402 OFFICE PLAZA
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 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: VALERIA ANDERSON

DIR.

04/30/2009

Electronic Signature of Signing Officer or Director

Date