2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N98000001685

Entity Name: FLORIDA SCHOOL MUSIC ASSOCIATION, INCORPORATED

FILED Jan 17, 2003 Secretary of State

Current Principal Place of Business:			New Prince	New Principal Place of Business:			
	CE PLAZA DRIVE SSEE, FL 32301	US					
Current Mailing Address:			New Maili	New Mailing Address:			
	CE PLAZA DRIVE SSEE, FL 32301	US					
FEI Number: 52-2092192 FEI Number Applied For ()			FEI Number Not App	Number Not Applicable () Certificate of Status Desired		()	
Name and	l Address of Cur	rent Registered Agent:	Name and	Address of I	New Registered Agent:		
	AMES T CE PLAZA DRIVE SSEE, FL 32301	US					
	named entity sub e of Florida.	mits this statement for the p	urpose of changing i	ts registered o	office or registered agent, or	r both,	
SIGNATUI	RE:						
Electronic Signature of Registered Agent			nt		Date		
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS			
Title: Name: Address: City-St-Zip:	V/D () De ROSER, LYNDA 915 HILLCREST L/ TALLAHASSEE, FL	Title: Name: Address: City-St-Zip:	P/D (X ROSER, LYND 915 HILLCRES TALLAHASSEE	ST LANE			
Title: Name: Address: City-St-Zip:	D () De LANE, VERTIS 801 GLENRIDGE V WINTER PARK, FL	VAY	Title: Name: Address: City-St-Zip:	D (X ROGER, DEAR 1990 25TH STI VERO BEACH,	REET		
Title: Name: Address: City-St-Zip:	P/D () De REYNOLDS, JEAN 301 4TH STREET, LARGO, FL 33779	NE SW	Title: Name: Address: City-St-Zip:	V/D (X REYNOLDS, J 301 4TH STRE LARGO, FL 33	ET, SW		
Title: Name: Address:	M () De PERRY, JAMES T 207 OFFICE PLAZ		Title: Name: Address:	() Change ()Addition		

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.

City-St-Zip:

SIGNATURE: JAMES T. PERRY M 01/17/2003

TALLAHASSEE, FL 32301

City-St-Zip: