

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000006699

Entity Name: SOUTHWEST FLORIDA MUSIC TEACHERS ASSOCIATION, INC.**Current Principal Place of Business:**80 LOGAN BLVD S
NAPLES, FL 34119**Current Mailing Address:**80 LOGAN BLVD S
NAPLES, FL 34119 US**FEI Number:** 65-1060294**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BURDEN, CLARE M
95 22ND AVE NE
NAPLES, FL 34120 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:** CLARE M BURDEN

02/27/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name SUNDBY, CANDACE B
Address 10520 AMIATA WAY
 UNIT 301
City-State-Zip: FORT MYERS FL 33913

Title 2ND VP
Name MANEVAL, AMY
Address 4093 CHERRYBROOK LOOP
City-State-Zip: FORT MYERS FL 33966

Title SECRETARY
Name GRUBER, SABRINA
Address 18160 HORSESHOEBAY CIRCLE
City-State-Zip: FORT MYERS FL 33967

Title 1ST VP
Name MEDSKER, LINDA
Address 28140 HERRING WAY
City-State-Zip: BONITA SPRINGS FL 34135

Title D
Name SHIRLEY, FURRY
Address 3000 WEST GULF SHORE DRIVE
City-State-Zip: SANIBEL FL 33957

Title 3RD VP
Name CHRISTMAN, RUTH
Address 15091 SHAMROCK DR.
City-State-Zip: FORT MYERS FL 33912

Title TREASURER
Name BURDEN, CLARE M
Address 80 LOGAN BLVD S
City-State-Zip: NAPLES FL 34119

I hereby 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 all other like empowered.

SIGNATURE: CLARE M BURDEN**TREASURER**

02/27/2019

Electronic Signature of Signing Officer/Director Detail

Date