FILE NOW: FILING FEE IS $61.25

NONPROFIT CORPORATION ANNUAL REPORT **1996**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 716884 (2)

1. Corporation Name

THE CHORAL SOCIETY OF PENSACOLA, INC.

Principal Place of Business	Mailing Address
% WILLIAM CLARKE 1000 COLLEGE BLVD PENSACOLA FL 32504	% WILLIAM CLARKE 1000 COLLEGE BLVD PENSACOLA FL 32504

3. Date Incorporated or Qualified: 07/15/1969
3a. Date of Last Report: 06/16/1995

	Principal Place of Business	Mailing Address
2. / 2a.	% Paul McGahie	% Paul McGahie
22 / 27 Suite, Apt. #, etc.	1000 College Blvd	1000 College Blvd
23 / 28 City & State	Pensacola FL.	Pensacola FL
24 / 29 Zip	32504	32504
25 / 30 Country	Escambia	Escambia

4. FEI Number: 23-7067468 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☑ No

9. Name and Address of Current Registered Agent

MCGAHIE, PAUL
1000 COLLEGE BLVD
PENSACOLA FL 32504

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent's signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	FRANCE, PETER		1.2 NAME		
STREET ADDRESS	104 OAK ST.		1.3 STREET ADDRESS		
CITY-ST-ZIP	MILTON FL		1.4 CITY-ST-ZIP		
TITLE	VD	☑ DELETE	2.1 TITLE	VD	☐ Change ☑ Addition
NAME	CONNOR, BILL		2.2 NAME	Parker, Elsie	
STREET ADDRESS	3365 TOMPKINS STREET		2.3 STREET ADDRESS	8812 Burning Tree Rd.	
CITY-ST-ZIP	PENSACOLA FL		2.4 CITY-ST-ZIP	Pensacola, FL 32514	
TITLE	SD	☑ DELETE	3.1 TITLE	SD	☐ Change ☑ Addition
NAME	COBB, MARTHA		3.2 NAME	Lloyd Elspeth	
STREET ADDRESS	305 RENTZ AVE.		3.3 STREET ADDRESS	1122 N. Baylen St	
CITY-ST-ZIP	PENSACOLA FL		3.4 CITY-ST-ZIP	Pensacola, FL 32501	
TITLE	SD	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	DEBARI, REBA		4.2 NAME		
STREET ADDRESS	6901 FALCON DR.		4.3 STREET ADDRESS		
CITY-ST-ZIP	PENSACOLA FL		4.4 CITY-ST-ZIP		
TITLE	TD	☑ DELETE	5.1 TITLE	TD	☐ Change ☑ Addition
NAME	ADKINS, T. MICHAEL		5.2 NAME	Shimel, Paul	
STREET ADDRESS	6205 WINDWOOD DR.		5.3 STREET ADDRESS	3441 Baisden Rd	
CITY-ST-ZIP	PENSACOLA FL		5.4 CITY-ST-ZIP	Pensacola, FL 32503	
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Paul O. Shimel Paul O. Shimel Treasurer 4/18/96 904-444-6808
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #