

DOCUMENT # 716884

1. Entity Name

THE CHORAL SOCIETY OF PENSACOLA, INC.

FILED
Jan 08, 2001 8:00 am
Secretary of State

01-08-2001 90051 011 ****61.25

Principal Place of Business

C/O ROSEMARY PEARCE
1000 COLLEGE BLVD
PENSACOLA FL 32504
US

Mailing Address

C/O ROSEMARY PEARCE
1000 COLLEGE BLVD
PENSACOLA FL 32504
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

23-7067468

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PETERSON, RALPH
3975 HIDDEN OAK DR.
PENSACOLA FL 32501

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW:
FEE IS \$61.25**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Delete
NAME **P**
FLOCK, ANDREW
STREET ADDRESS **5448 ROWE TR.**
CITY-ST-ZIP **PACE FL 32571**

TITLE ☒ Delete
NAME **SD**
COWAN, ANNE M
STREET ADDRESS **2720 SEALARK LANE**
CITY-ST-ZIP **MILTON FL 32583**

TITLE ☐ Delete
NAME **D**
WAGGONER, JAN
STREET ADDRESS **3975 HIDDEN OAK DR.**
CITY-ST-ZIP **PENSACOLA FL 32504**

TITLE ☐ Delete
NAME **TD**
MESSICK, JIMMY D
STREET ADDRESS **4300 BAYOU BLVD., STE 21**
CITY-ST-ZIP **PENSACOLA FL 32503**

TITLE ☐ Delete
NAME **V**
PETERSON, RALPH
STREET ADDRESS **3975 HIDDEN OAK DR.**
CITY-ST-ZIP **PENSACOLA FL 32504**

TITLE ☐ Delete
NAME **ED**
HURD, LINDY
STREET ADDRESS **3831 FOREST GLEN DR**
CITY-ST-ZIP **PENSACOLA FL 32504**

TITLE ☒ Change ☐ Addition
NAME **D**
Flock, Andrew
STREET ADDRESS **5448 Rowe Tr.**
CITY-ST-ZIP **PACE, FL 32571**

TITLE ☐ Change ☒ Addition
NAME **V**
MOORE, ROBERT
STREET ADDRESS **1904 E LaRue St.**
CITY-ST-ZIP **PENSACOLA, FL 32501**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME **P**
PETERSON, RALPH
STREET ADDRESS **3975 Hidden Oak Dr.**
CITY-ST-ZIP **Pensacola, FL 32504**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

LINDY HURD
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)