FILED Jan 31, 2002 8:00 am **DOCUMENT # 769661** Secretary of State 1. Entity Name DELRAY BEACH CHORALE, INC. 01-31-2002 90127 021 ****61.25 Principal Place of Business Mailing Address P O BOX 127 P O BOX 127 BELRAY BEACH FL 33447-0127 BELRAY BEACH FL 33447 0127 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE PO Box PO Box 127 City & State City & State 4. FEI Number Applied For 59-2319134 B*∈A*C# DELRAY DELRAY BEACH Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired 33447-0127 33447-0127 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent BRUMM, GERALD Street Address (P.O. Box Number is Not Acceptable) 3490 PINE HAVEN CIR MERKLE, WILLIAM R 1901 S CONGRESS AVE #120 Zip Code 334-3 **BOYNTON BEACH FL 33426** BOCA RATON 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. Bou Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be Make Check Payable to FILE NOW: FEE IS \$61.25 Trust Fund Contribution. **Department of State** Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. PN TITLE **⊠** Delete TITLE **X** Change Addition ENGELHARDT, NAME STRACHAN, HUGH NAME JO ANN 205 BEACHWAY DRIVE STREET ADDRESS 5540 COACH HOUSE CIRCLE STREET ADDRESS FL 334-35 CITY-ST-ZIP CITY-ST-ZIP OCEAN RIDGE, **BOCA RATON FL 33486** TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME WELLS, STEPHEN NAME STREET ADDRESS 3890 LAKEWOOD RD #4 STREET ADDRESS CITY-ST-ZIP_ CITY_ST-ZIP LAKE WORTH FL 33461 TITLE ☐ Delete Addition ☐ Change STURDY, LINDA NAME NAME STREET ADDRESS **4869 NW 2ND TERR** STREET ADDRESS CITY-ST-ZIP **BOCA RATON FL 33431** CITY-ST-7IP ۷D TITLE TITLE ☐ Delete ☐ Change ☐ Addition HOWE, TODDY NAME STREET ADDRESS 401 E LINTON BLVD 612 STREET ADDRESS CITY-ST-ZIF **DELRAY BEACH FL 33483** CITY-ST-ZIP TITLE TD Delete TIT! F **Change** Addition KIMBALL, SUSAN L 1001 SW 17TH STREET DEWAUJ, GAY NAME 790 ANDRES AVE H-102 STREET ADDRESS STREET ADDRESS CITY-ST-ZIF **DELRAY BEACH FL 33483** CITY-ST-ZIP BOC A RATON, FL 33486 TITLE Delete TITLE Change Change Addition BRUMM , GERALD A MERKLE, WILLIAM R NAME NAME 3490 PINE HAVEN CIRCLE STREET ADDRESS 4589 S LAKE DRIVE STREET ADDRESS

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 nment with an address, with all other like empowered.

CITY-ST-ZIP

SIGNATURE: GERALDAAURBROUNDURTREASURER / DIRECTOR

BOYNTON BEACH FL 33436

CITY-ST-7IP

BOCK RATON, FL

(9/01)

CR2E037