

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2007 8:00 am
Secretary of State

04-25-2007 90162 047 ****70.00

DOCUMENT # N02000000236					
1. Entity Name INDIALANTIC CHAMBER SINGERS, INC.					
Principal Place of Business %EASTMINSTER PRESBYTERIAN CHURCH 106 N RIVERSIDE DR INDIALANTIC, FL 32903			Mailing Address %EASTMINSTER PRESBYTERIAN CHURCH 106 N RIVERSIDE DR INDIALANTIC, FL 32903		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	03042007 Chg-NP CR2E037 (12/06)	
4. FEI Number 59-3733650				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
MORRISON, CHARLES 416 RIVEVIEW LANE MELBOURNE BEACH, FL 32951			Name <u>David Vageding</u> Street Address (P.O. Box Number is Not Acceptable) <u>1555 N. Highway A1A #302</u> City <u>Indialantic</u> <u>FL</u> Zip Code <u>32903</u>		
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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE <u>David Vageding</u> <small>Signature, typed or printed name of registered agent and title if applicable.</small>		DATE <u>4/16/07</u> <small>(NOTE: Registered Agent signature required when reappointing)</small>			
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	PD	<input type="checkbox"/> Delete	TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MORRISON, CHARLES		NAME	Covault, Nancy	
STREET ADDRESS	416 RIVEVIEW LANE		STREET ADDRESS	4239 Woodhall Circle	
CITY-ST-ZIP	MELBOURNE BEACH, FL 32951		CITY-ST-ZIP	Rockledge, FL 32955	
TITLE	VD	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MAHAN, FRED		NAME		
STREET ADDRESS	625 LYCHEE PLACE		STREET ADDRESS		
CITY-ST-ZIP	MERRITT ISLAND, FL 32952		CITY-ST-ZIP		
TITLE	MDD	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VOGEDING, DAVID		NAME		
STREET ADDRESS	1555 N HIGHWAY A1A #302		STREET ADDRESS		
CITY-ST-ZIP	INDIALANTIC, FL 32903		CITY-ST-ZIP		
TITLE	SD	<input type="checkbox"/> Delete	TITLE	SD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	COVAULT, NANCY		NAME	Morrison, Charles	
STREET ADDRESS	4239 WOODHALL CIR.		STREET ADDRESS	416 Riverview Lane	
CITY-ST-ZIP	ROCKLEDGE, FL 32955		CITY-ST-ZIP	Melbourne Beach, FL 32951	
TITLE	TD	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SELLERS, KIM		NAME		
STREET ADDRESS	1028 ASHLEY AVE.		STREET ADDRESS		
CITY-ST-ZIP	INDIAN HARBOUR BEACH, FL 32937		CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: <u>Kim Sellers</u> Kim Sellers		Date <u>22 April 2007</u>		Daytime Phone # <u>321-977-2166</u>	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					