

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000010060

FILED  
Jan 05, 2011  
Secretary of State

**Entity Name:** REFLECTIONS CHAMBER ENSEMBLE, INC.

**Current Principal Place of Business:**

12015 ORANGE GROVE DR.  
TAMPA, FL 33618

**New Principal Place of Business:**

**Current Mailing Address:**

12015 ORANGE GROVE DR.  
TAMPA, FL 33618

**New Mailing Address:**

FEI Number: 20-3561943

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

HOROWITZ, MITCHELL I  
501 E. KENNEDY BLVD., SUITE 1700  
TAMPA, FL 33602 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: MC COLLEY, THOMAS  
Address: 1105 E. CHELSEA ST.  
City-St-Zip: TAMPA, FL 33603

Title: D  
Name: MC COLLEY, STACEY  
Address: 1105 E. CHELSEA ST.  
City-St-Zip: TAMPA, FL 33603

Title: D  
Name: BANNON, JOHN  
Address: 6401 23RD LANE NORTH  
City-St-Zip: ST. PETERSBURG, FL 33702

Title: D  
Name: LE BLANC, MICHAEL  
Address: 9716 FOX HOLLOW RD.  
City-St-Zip: TAMPA, FL 33647

Title: D  
Name: DONOVAN, CINDY  
Address: 8805 ROBERTS RD.  
City-St-Zip: ODESSA, FL 33647

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: THOMAS MCCOLLEY

D

01/05/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date