

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000000355

FILED
Apr 25, 2012
Secretary of State

Entity Name: SUNCOAST CHORALE, INC.

Current Principal Place of Business:

4480 VIA DEL VILLETTI
VENICE, FL 34293 US

New Principal Place of Business:

Current Mailing Address:

4480 VIA DEL VILLETTI
VENICE, FL 34293 US

New Mailing Address:

FEI Number: 65-0432964 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MORRISON, JOEL L
4480 VIA DEL VILLETTI
VENICE, FL 34293 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: PD
Name: MEACHAM, CLIFF
Address: 301 CAMDEN LANE
City-St-Zip: PT. CHARLOTTE, FL 33953

Title: VD
Name: MILNE, CATHERINE
Address: 2255 LAKEWOOD DRIVE
City-St-Zip: NOKOMIS, FL 34275

Title: TD
Name: BOWERS, SHEILA
Address: 1701 RAVINA CIRCLE
City-St-Zip: VENICE, FL 34292

Title: SD
Name: CHANDLER, JAMIE L
Address: 134 WARREN AVENUE
City-St-Zip: ENGLEWOOD, FL 34223

Title: D
Name: BYRON, RAYMOND
Address: 23159 ALLEN AVE
City-St-Zip: PORT CHARLOTTE, FL 33980

Title: D
Name: NEUMEISTER, ROBERT
Address: 1548 JASPER COURT
City-St-Zip: VENICE, FL 34292

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: JOEL MORRISON

PT

04/25/2012

Electronic Signature of Signing Officer or Director

Date