

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 721894

**Entity Name:** MIAMI CHILDREN'S CHORUS, INC.

**Current Principal Place of Business:**

1533 SUNSET DR  
STE 215  
CORAL GABLES, FL 33143

**Current Mailing Address:**

1533 SUNSET DR  
STE 215  
CORAL GABLES, FL 33143 US

**FEI Number:** 23-7250811

**Certificate of Status Desired:** No

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

SHARP, TIMOTHY A  
1533 SUNSET DR.  
#215  
CORAL GABLES, FL 33143 US

*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

**Officer/Director Detail :**

Title CD  
Name LINDENFELD, MARTIN  
Address 5280 SW 80TH ST  
City-State-Zip: MIAMI FL 33143

Title D  
Name SHARP, TIMOTHY A  
Address 8455 SW 119TH ST  
City-State-Zip: MIAMI FL 33156

Title TD  
Name BROOKES, ROBERT  
Address 104 CRANDON BLVD.  
SUITE 327  
City-State-Zip: KEY BISCAYNE FL 33149-1564

Title DIRECTOR  
Name LINDENFELD, HELENE  
Address 5280 SW 80 ST  
City-State-Zip: MIAMI FL 33143

Title DIRECTOR  
Name KAPLAN, BETSY  
Address 2 GROVE ISLE BLVD.  
APT. 1603  
City-State-Zip: MIAMI FL 33133-4112

Title DIRECTOR  
Name HANNA, ARWA  
Address 6844 SW 92 ST  
City-State-Zip: MIAMI FL 33156-1503

*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:** TIMOTHY A. SHARP

**DIRECTOR**

**01/12/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

Date