

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01505

Entity Name: YOUNG PATRONESSES OF THE OPERA, INC.**Current Principal Place of Business:**8390 N.W. 25TH ST
C/O FLORIDA GRAND OPERA
MIAMI, FL 33122**Current Mailing Address:**8390 N.W. 25TH ST
C/O FLORIDA GRAND OPERA
MIAMI, FL 33122 US**FEI Number:** 59-2376906**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HERRON, JAMES M
C/O HERRON JACOBS ORTIZ LLP
1401 BRICKELL AVE STE 840
MIAMI, FL 33131 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	PRESIDENT
Name	MEDEROS, PATRICIA
Address	7226 SW 146 STREET CIRCLE
City-State-Zip:	PALMETTO BAY FL 33158

Title	VP
Name	WHEELER, LISA
Address	7355 SW 142ND TERRACE
City-State-Zip:	MIAMI FL 33158

Title	CORRESPONDING SECRETARY
Name	BRIGGLE, ANASTASIA
Address	4410 UNIVERSITY DRIVE
City-State-Zip:	CORAL GABLES FL 33146

Title	TREASURER
Name	SPIELER, LUCIE
Address	6820 TORDERA STREET
City-State-Zip:	CORAL GABLES FL 33146

Title	FINANCIAL SECRETARY
Name	BEAL, RENE
Address	1311 GRANADA BOULEVARD
City-State-Zip:	CORAL GABLES FL 33134

Title	RECORDING SECRETARY
Name	WERTANZL, LISE-MARIE
Address	19008 PARK RIDGE STREET
City-State-Zip:	WESTON FL 33332

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: LUCIE SPIELER

TREASURER

02/26/2014

Electronic Signature of Signing Officer/Director Detail_____
Date