Electronic Signature of Signing Officer/Director Detail

**Current Principal Place of Business:** 8390 N.W. 25TH ST

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Entity Name: YOUNG PATRONESSES OF THE OPERA, INC.

C/O FLORIDA GRAND OPERA MIAMI, FL 33122

DOCUMENT# N01505

# **Current Mailing Address:**

8390 N.W. 25TH ST C/O FLORIDA GRAND OPERA MIAMI, FL 33122 US

# FEI Number: 59-2376906

# Name and Address of Current Registered Agent:

LOTT, LESLIE C/O LOTT & FISCHER, PL 355 ALHAMBRA CIRCLE SUITE 1100 CORAL GABLES, FL 33134 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 Registere	ed Agent

# **Officer/Director Detail :**

	Title	PRESIDENT	Title	VP		
	Name	PINON, GAIL	Name	WERTANZL, LISE-MARIE		
	Address	1225 ALEGRIANO AVE	Address	19008 PARK RIDGE ST		
	City-State-Zip:	CORAL GABLES FL 33146	City-State-Zip:	WESTON FL 33332		
	Title	FINANCIAL SECRETARY	Title	RECORDING SECRETARY		
	Name	HILL, STEFANIE MEDEROS	Name	WATERS, BARBARA		
	Address	730 SALDANO AVE	Address	14610 SW 69TH AVE		
	City-State-Zip:	CORAL GABLES FL 33143	City-State-Zip:	MIAMI FL 33158		
	Title	CORRESPONDING SECRETARY	Title	TREASURER		
	Name	LENNON, LEE	Name	SOLH, AMAL		
	Address	3801 PONCE DE LEON BLVD	Address	50 BISCAYNE BLVD 4910		
	City-State-Zip:	CORAL GABLES FL 33134	City-State-Zip:	MIAMI FL 33132		

VICE PRESIDENT

# FILED Mar 11, 2017 Secretary of State CC0729542759

Certificate of Status Desired: Yes

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: GAIL PINON

03/11/2017

Date

Date