

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04000011145

**Entity Name:** ARCOLA LAKES PARK SINGING ANGELS, INC.**Current Principal Place of Business:**1736 NW 47TH TERRACE  
MIAMI, FL 33142**Current Mailing Address:**1736 NW 47TH TERRACE  
MIAMI, FL 33142**FEI Number:** 20-1308407**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**WILLIAMS, HENRY  
1736 NW 47TH TERRACE  
MIAMI, FL 33142 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           TREASURER  
Name           DORSETT, EVELYN  
Address       13300 NW 18TH PLACE  
City-State-Zip: MIAMI FL 33167

Title           CHORUS, DIRECTOR  
Name           SIMMONS, MARY  
Address       310 NE 76 STREET  
City-State-Zip: MIAMI FL 33138

Title           CHAPLIN  
Name           WILLIAMS, MAMIE  
Address       1050 NW 90TH STREET  
City-State-Zip: MIAMI FL 33130

Title           ASST, CHAPLIN  
Name           JOHNSON, SYBIL  
Address       19201 NW 19 AVE  
City-State-Zip: MIAMI FL 33167

Title           PRESIDENT  
Name           STIBBINS, TILLIE  
Address       8900 NW 6 AVE #108  
City-State-Zip: MIAMI FL 33127

Title           DIRECTOR, OF MUSIC  
Name           STRACHAN, RICHARD  
Address       8841 NW 14 AVEUNE  
City-State-Zip: MIAMI FL 33147

Title           SECRETARY  
Name           BURTON, TOMMY  
Address       11293 NW 21 COURT  
City-State-Zip: MIAMI FL 33167

Title           CARE BEARS  
Name           VARNER, RAMONA  
Address       17701 NW 32 COURT  
City-State-Zip: MIAMI FL 33056

**Continues on page 2**

*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: HENRY WILLIAMS****REGISTERED AGENT****02/18/2016**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title            CALLING TREE  
Name            JAMES, ELIZABETH  
Address        6300 NW 170TH TERRACE  
City-State-Zip: MIAMI FL 33015

Title            FINANCIAL SEC  
Name            HADLEY, BRENDA  
Address        566 NW 47 TERRACE  
City-State-Zip: MIAMI FL 33127

Title            VP  
Name            SANDERS, GRACE  
Address        2371 NW 119 STREET #105  
City-State-Zip: MIAMI FL 33167

Title            BUSINESS MANAGER  
Name            WILLIAMS, HENRY  
Address        1736 NW 47TH TERRACE  
City-State-Zip: MIAMI FL 33142