## 2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

#### DOCUMENT# N0900003705

Entity Name: THE ROBERT SHARON CHORALE, INC.

### **Current Principal Place of Business:**

C/O DR ROBERT SHARON 2255 ALLEN CREEK RD. WEST PALM BEACH, FL 33411

# **Current Mailing Address:**

2255 ALLEN CREEK RD WEST PALM BEACH, FL 33411 US

# FEI Number: 26-4797640

### Name and Address of Current Registered Agent:

WEISS, CATHERINE J 471 INDIGO AVE. WELLINGTON, FL 33414 US FILED Jan 12, 2015 Secretary of State CC0342814665

Certificate of Status Desired: No

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

# Officer/Director Detail :

Title	TRUS	Title	VP
Name	SHARON, ROBERT	Name	GENOVESE, KIM
Address	2255 ALLEN CREEK ROAD	Address	6124 NORTH GUAVA LANE
City-State-Zip:	WEST PALM BEACH FL 33411	City-State-Zip:	LANTANA FL 33462
Title	CO-TRUSTEE	Title	SECRETARY
Name	WEISS, CATHERINE J	Name	GENOVESE, C. RICHARD
Address	471 INDIGO AVE	Address	6124 NORTH GUAVA LN
City-State-Zip:	WELLINGTON FL 33414	City-State-Zip:	LANTANA FL 33462
Title	TREASURER	Title	Ρ
Name	ROTH, PHOEBE T	Name	SANTOS, MARGARET
Address	3400 SPRINGDALE BLVD.	Address	8163 PINE CAY RD
	T104	City-State-Zip:	WELLINGTON FL 33414
City-State-Zip:	PALM SPRINGS FL 33461	-	

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: PHOEBE T ROTH

TREASURER

01/12/2015

Date

Electronic Signature of Signing Officer/Director Detail

Date