2020 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:

SHARON, ROBERT 2255 ALLEN CREEK ROAD WEST PALM BEACH, FL 33411 US FILED Feb 05, 2020 Secretary of State 3529422878CC

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 :

Officer/Director Detail :			
Title	TRUS	Title	SECRETARY
Name	SHARON, ROBERT	Name	SHEARER, CONNIE
Address	2255 ALLEN CREEK ROAD	Address	2641 GATELY DR #509
City-State-Zip:	WEST PALM BEACH FL 33411	City-State-Zip:	W PALM BEACH FL 33415
Title	т	Title	V
THE	I	The	v
Name	NOVINS, SHEILA	Name	MORALES, PEGGY
Address	4786 EXETER EST	Address	9950 B BANANA TREE RUN
City-State-Zip:	WELLINGTON FL 33449	City-State-Zip:	BOYNTON BEACH FL 33436
Title	TR	Title	PRESIDENT
Name	KADERA, WANDA	Name	GENOVESE, KIM
Address	1301 SW 10 AVENUE E208	Address	6124 NO GUAVA LANE
City-State-Zip:	DELRAY BEACH FL 33444	City-State-Zip:	LANTANA FL 33462

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: WANDA P KADERA

TRUSTEE

Date

Electronic Signature of Signing Officer/Director Detail

Date