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: ROBERT SHARON

Electronic Signature of Signing Officer/Director Detail

TRUSTEE

2013 FLORIDA NOT FOR PROFIT CORPORATION AMENDED 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

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	TP
Name	SHARON, ROBERT	Name	AVERKAMP, EMILY
Address	2255 ALLEN CREEK ROAD	Address	8641 ESTATE DRIVE
City-State-Zip:	WEST PALM BEACH FL 33411	City-State-Zip:	WEST PALM BEACH FL 33411
Title	π	Title	TS
Name	GENOVESE, KIM	Name	SANTOS, MARGARET
Address	6124 NORTH GUAVA LANE	Address	8163 PINE CAY RD
City-State-Zip:	LANTANA FL 33462	City-State-Zip:	WELLINGTON FL 33414
Title	TVP		
Name	TAYLOR, DAVID		
Address	5004 EL CLARO CR		
City-State-Zip:	WEST PALM BEACH FL 33415		

FILED Oct 24, 2013 Secretary of State CC3283453781

Certificate of Status Desired: No

Date

10/24/2013 Date