2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000003705

Entity Name: THE ROBERT SHARON CHORALE, INC.

FILED
Apr 20, 2021
Secretary of State
3110721729CC

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 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SHARON, ROBERT 2255 ALLEN CREEK ROAD WEST PALM BEACH, FL 33411 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:

Tit	ile	TRUS	Title	SECRETARY
Na	ame	SHARON, ROBERT	Name	SHEARER, CONNIE
Ac	ldress	2255 ALLEN CREEK ROAD	Address	2641 GATELY DR #509
Ci	ty-State-Zip:	WEST PALM BEACH FL 33411	City-State-Zip:	W PALM BEACH FL 33415

Title T Title 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

TitleTRTitlePRESIDENTNameKADERA, WANDANameGENOVESE, KIMAddress1301 SW 10 AVENUE F208Address6124 NO GUAVA LANE

Address 1301 SW 10 AVENUE E208 Address 6124 NO GUAVA LAN

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

ACCOUNTANT

04/20/2021