### 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: PAMELA W. MICHELL

Electronic Signature of Signing Officer/Director Detail

SIGNATURE: Electronic Signature of Registered Agent

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.

## **Officer/Director Detail :**

Title	Р	Title	S
Name	MICHELL, PAMELA W	Name	CLATERBOS, MARGITTA
Address	2324 SE 14TH ST	Address	9021 SW 96TH TER
City-State-Zip:	OCALA FL 34471	City-State-Zip:	OCALA FL 34481
Title	D		
Name	MCCALL, BETH		
Address	7073 SE 12TH CIR		
City-State-Zip:	OCALA FL 34480		

2324 SE 14TH STREET OCALA. FL 34471

**Current Mailing Address:** 

DOCUMENT# N9800004342

**Current Principal Place of Business:** 

# FEI Number: 59-3524125

## Name and Address of Current Registered Agent:

2324 SE 14TH STREET OCALA, FL 34471

MICHELL, PAMELA W 2324 SE 14TH STREET OCALA, FL 34471 US

Entity Name: CENTRAL FLORIDA MASTER CHOIR, INC.

## FILED May 10, 2016 Secretary of State CC2734812536

Certificate of Status Desired: Yes

PRESIDENT

Date