

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000004057

Entity Name: MIAMI GAY MEN'S CHORUS, INC.

Current Principal Place of Business:

5321 BUCHANAN ST
HOLLYWOOD, FL 33021

Current Mailing Address:

P.O. BOX 190209
MIAMI BEACH, FL 33119 US

FEI Number: 65-0932623

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

HART, KEITH M
5321 BUCHANAN ST
HOLLYWOOD, FL 33021 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: KEITH M HART

07/03/2013

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name HART, KEITH
Address 5321 BUCHANAN STREET
City-State-Zip: HOLLYWOOD FL 33021

Title SECRETARY
Name GARRETT, BRIAN
Address 804 CYPRESS GROVE LANE
 APT 402
City-State-Zip: POMPANO BEACH FL 33069

Title TREASURER
Name MASKIN, JONATHAN
Address 17053 NW 22HD STREET
City-State-Zip: PEMBROKE PINES FL 33028

Title DIRECTOR
Name STOWE, HOWARD
Address 79 NE 93 ST
City-State-Zip: MIAMI SHORES FL 33138

Title VP
Name DAVIS, COREY G
Address 615 NE 2ND STREET
 UNIT 708
City-State-Zip: MIAMI FL 33137

Title DIRECTOR
Name REINOSO, VIVIAN
Address 1120 SW 11TH ST
City-State-Zip: MIAMI FL 33129

Title DIRECTOR
Name BUICK, MICHAEL
Address 1717 N BAYSHORE DRIVE
 APT 1648
City-State-Zip: MIAMI FL 33132

Title DIRECTOR
Name GOLDSTEIN, ELIZABETH
Address 2555 COLLINS AVENUE
 APT 614
City-State-Zip: MIAMI BEACH FL 33139

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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: KEITH M HART

PRESIDENT

07/03/2013

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name LAWRIE, ROBIN
Address 1208 ALBERDCA
City-State-Zip: CORAL GABLES FL 33134

Title DIRECTOR
Name WADE, KATHY
Address 1948 SE 11TH STREET
City-State-Zip: HOMESTEAD FL 33035

Title DIRECTOR
Name MORIN, RAUL
Address 105 NE 22ND STREET
City-State-Zip: MIAMI FL 33137

Title DIRECTOR
Name SILVA, JR, HECTOR L
Address 3470 EAST COAST AVE
UNIT 1909
City-State-Zip: MIAMI FL 33137