

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 706182

FILED
May 02, 2007
Secretary of State

Entity Name: JACKSONVILLE HARMONY CHORUS, INC.

Current Principal Place of Business:

P. O. BOX 24464
JACKSONVILLE, FL 32241

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 24464
JACKSONVILLE, FL 32241

New Mailing Address:

1312 ALVIS RD
JACKSONVILLE, FL 32220

FEI Number: 59-6166251 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

GOOCH, ANN
1704 SHOREVIEW DR
JACKSONVILLE, FL 32218 US

Name and Address of New 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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: HICE, SHERRY K
Address: 11640 RIDE WAY
City-St-Zip: JACKSONVILLE, FL 32223

Title: DT () Delete
Name: JINRIGHT, HELEN
Address: 3641 CHAFFEE ROAD SOUTH
City-St-Zip: JACKSONVILLE, FL 32221

Title: DS () Delete
Name: HENDRIX, VONNIE
Address: 4240 DALRY DR
City-St-Zip: JACKSONVILLE, FL 32246

Title: D () Delete
Name: BICAN, SARAH J
Address: 1469 BELLESHORE CIR
City-St-Zip: JACKSONVILLE, FL 32218

Title: D () Delete
Name: GOOCH, ANN
Address: 1704 SHOREVIEW DR
City-St-Zip: JACKSONVILLE, FL 32218

Title: D () Delete
Name: ROSE, MARY
Address: 816 SAWYER RUN LANE
City-St-Zip: PONTE VEDRA BEACH, FL 32082

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: RUSSO, JACKIE
Address: 11906 HARBOUR COVE DRIVE SOUTH
City-St-Zip: JACKSONVILLE, FL 32225

Title: D (X) Change () Addition
Name: SHEA, JUDY
Address: 1572 PALM AVENUE
City-St-Zip: JACKSONVILLE, FL 32218

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: HELEN JINRIGHT

DT

05/02/2007

Electronic Signature of Signing Officer or Director

Date