## 2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED Aug 12, 2009 **DOCUMENT#713978** Secretary of State

Entity Name: THE TAMPA ORATORIO SINGERS, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

4315 WORTHINGTON CIRCLE PALM HARBOR, FL 34615

**Current Mailing Address: New Mailing Address:** 

P.O. BOX 5124 TAMPA, FL 336755124 US

FEI Number: 59-6201219 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BRYSON, JAMES R 4315 WORTHINGTON CR US PALM HARBOR, FL 34685

**OFFICERS AND DIRECTORS:** 

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:

Date

## Electronic Signature of Registered Agent

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change ( ) Addition BRYSON, JAMES R BRYSON, JAMES R Name: Name:

4315 WORTHINGTON CR Address: 4315 WORTHINGTON CR Address: City-St-Zip: PALM HARBOR, FL 34685 City-St-Zip: PALM HARBOR, FL 34685 US

Title: VD () Delete Title: VD (X) Change ( ) Addition BURSAK, QUINN Name: SELPPH, FRANK Name:

Address: 16010 WYNDOVER RD Address: P.O. BOX 5905 City-St-Zip: TAMPA, FL 33647 City-St-Zip: TAMPA, FL 33675 US

Title: () Delete Title: (X) Change ( ) Addition

VERDEL, ELLEN ROBBINS, LILA Name: Name: 19205 MEADOW PINE DR 4223MEADOW HILL DR Address: Address: City-St-Zip: TAMPA, FL 33647 City-St-Zip: TAMPA, FL 33618 US

Title: CS ( ) Delete Title: CS (X) Change ( ) Addition

Name: HARDEN, MARY LOU Name: REED, ALLISON Address: 902 W. HILLSBOROUGH Address: 12701 TALL PINE DR City-St-Zip: SEFFNER, FL 33584 City-St-Zip: TAMPA, FL 33625 US

Title: () Delete Title: ( ) Change (X) Addition

MICHELLE, VAN DYKE Name: Name: 4515 DANUBE AVE, #B4 Address: Address: City-St-Zip: City-St-Zip: TAMPA, FL 33606 US

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: JAMES R. BRYSON **PRES** 08/12/2009