## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#721894** 

FILED Apr 28, 2009 Secretary of State

Entity Name: MIAMI CHILDREN'S CHORUS, INC.

**Current Principal Place of Business: New Principal Place of Business:** 1533 SUNSET DR STE 215 CORAL GABLES, FL 33143 US **New Mailing Address: Current Mailing Address:** 1533 SUNSET DR STE 215 CORAL GABLES, FL 33143 US FEI Number: 23-7250811 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: SHARP, TIMOTHY A WARD, JENNA S 7810 SW 99TH ST 1540 MERIDIAN MIAMI, FL 33156 #4C MIAMI BEACH, FL 33139 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: JENNA S. WARD 04/28/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition BROOKES, ROBERT Name: Name: 8200 NW 33RD STREET, STE 400 Address: Address: City-St-Zip: MIAMI, FL 33122 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition SHARP, TIMOTHY A Name: SHARP, TIMOTHY A Name: Address: 7810 SW 99TH ST Address: 8455 SW 119TH ST City-St-Zip: MIAMI, FL 33156 City-St-Zip: MIAMI, FL 33156 Title: () Delete Title: () Change () Addition LOUMIET, JUAN P Name: Name: 1221 BRICKELL Address: Address: City-St-Zip: MIAMI, FL 33131 City-St-Zip: Title: ( ) Delete Title: () Change () Addition Name: IGLESIAS, GENARO Name: Address: 88 WEST MCINTYRE ST Address: City-St-Zip: KEY BISCAYNE, FL 33149 City-St-Zip: Title: Title: () Delete () Change () Addition STICKNEY, TIMOTHY P Name: Name: 104 CRANDON BLVD, STE 309 Address: Address: City-St-Zip: KEY BISCAYNE, FL 33149 City-St-Zip: Title: () Delete Title: ( ) Change (X) Addition WARD, JENNA S Name: Name: Address: Address: 1533 SUNSET DR. #215 CORAL GABLES, FL 33143 City-St-Zip: 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: JUAN P. LOUMIET TD 04/28/2009