2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

Mar 27, 2007 8:00 am Secretary of State **DOCUMENT # 742980** 1. Entity Name 03-27-2007 90014 036 ****61.25 LAKE BRANTLEY CHORAL BOOSTERS, INC. Mailing Address Principal Place of Business 991 SAND LAKE RD ALTAMONTE SPRINGS FL 32714 991 SAND LAKE RD ALTAMONTE SPRINGS FL 32714 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/06) City & State City & State 4. FEI Number Applied For NO-T APPLICABLE Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name KILPATRICK, CARLTON E MR. Street Address (P.O. Box Number is Not Acceptable) 991 SAND LAKE RD ALTAMONTE SPRINGS FL 32714 Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE DATE Signature, typed or printed harne of registered agent and title it applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. Due By May 1, 2007 Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. Bucklan, Mary Ann 512 Sugar Ridge Ct Delete Change Ш TITLE NAMI GORE, TRACY STREET ADDRESS 115 WISTERIA DR. SIBILIT ADDRESS Longwood, Fl. 32779 CITY ST 7IP CHY SI-7IP LONGWOOD FL 32779 ☐ Delete THILE Green Kathu NAMI BRIA, JOANN NAME STREET ADDRESS STRUCT ADDRESS 233 STEVENAGE DR. CHY ST-7P CHY ST-ZIP LONGWOOD FL 32779 BHILL Delete HILE NAME BUCKLAN, MARY ANN STREET ADDRESS STREET ADDRESS 512 SUGAR RIDGE CT. CITY ST ZIP CITY-ST-ZIP LONGWOOD FL 32779 Delete Change ☐ Addition HILLE TITLE NAMI NAME SPENCER, BETSY STREET ADDRESS STREET ADDRESS 193 HOLDERNESS DR CHY SI-ZIP CITY S1-ZIP LONGWOOD FL 32779 ☐ Defete TIME ☐ Change ☐ Addition 11111 NAME NAMI WINN, JANICE STREET ADDRESS STREET ADDRESS 101 WILD PLUM LANE Ctty-S1-ZIP CHY-ST-ZIP LONGWOOD FL 32779 HILLE ☐ Delete ☐ Change Addition NAMI NAME STREET ADDRESS STREET ADDRESS CITY ST ZIP CITY- ST- AP

12. I horeby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119. Florida Statutes, I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal offect 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 in Block 10 or Block 11 if changed, or on an attachment with an address with all other inkermowered.

SIGNATURE:

FILED