## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 744153** 

FILED Jan 14, 2009 Secretary of State

Entity Name: FORT WALTON BEACH COMMUNITY CHORUS, INC.

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

539 POCAHONTAS DR. 539 POCAHONTAS DR. P O BOX 2221 FT WALTON BCH., FL 32547

FT WALTON BCH., FL 32549

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

539 POCAHONTAS DR. P.O. BOX 2221

P O BOX 2221 FT WALTON BCH., FL 32549 FT WALTON BCH., FL 32549

FEI Number: 59-1955428 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:

HODGINS, JEAN M 539 POCAHONTAS DR. FORT WALTON BEACH, FL 32547 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:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

**OFFICERS AND DIRECTORS:** 

(X) Change ( ) Addition () Delete

BARKER, GENE G. BARKER, GENE G. Name: Name: 45 NE BEAL PKWY. Address: 45 NE BEAL PKWY. Address:

City-St-Zip: FT WALTON BCH., FL 00000, City-St-Zip: FT WALTON BCH., FL 32548

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

LINDEGREN, CECILE K., LINDEGREN, CECILE K., Name: Name: Address: 206 VICKI LEIGH DR. Address: 206 VICKI LEIGH DR.

City-St-Zip: FT WALTON BCH., FL 00000, City-St-Zip: FT WALTON BCH., FL 32547

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

HODGINS, JEAN M., Name: HODGINS, JEAN M., Name: 539 POCAHONTAS DR 539 POCAHONTAS DR. Address: Address: City-St-Zip: FT WALTON BCH. FL. City-St-Zip: FT WALTON BCH., FL 32547

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: GENE G. BARKER TD 01/14/2009