

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 748348

FILED
Jan 10, 2006
Secretary of State

Entity Name: BEL CANTO SINGERS, INC.

Current Principal Place of Business:

918 PINEAPPLE ROAD
SOUTH DAYTONA, FL 321192543

New Principal Place of Business:

Current Mailing Address:

918 PINEAPPLE ROAD
SOUTH DAYTONA, FL 321192543

New Mailing Address:

FEI Number: 59-1954899 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROGERS, JUDSON
918 PINEAPPLE ROAD
SOUTH DAYTONA, FL 32119 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: D () Delete
Name: ROGERS, JUDSON
Address: 918 PINEAPPLE ROAD
City-St-Zip: SOUTH DAYTONA, FL 32119

Title: PD () Delete
Name: KRUEH, GERALD D
Address: 1060 RED MAPLE COURT
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: VD () Delete
Name: BUNKE, JEFF
Address: 721 SLEEPY HOLLOW DRIVE
City-St-Zip: PORT ORANGE, FL 32127

Title: T () Delete
Name: BIGGS, CAROLYN
Address: 6071 SABAL HAMMOCK CIR
City-St-Zip: PORT ORANGE, FL 32128

Title: S () Delete
Name: CAROL, LENLEAVE
Address: 5819 SPRUCE CREEK WOODS DR.
City-St-Zip: PORT ORANGE, FL 32169

Title: S () Delete
Name: WHITEHEAD, KATHY
Address: 71 OCEAN WAY DRIVE
City-St-Zip: PONCE INLET, FL 32127

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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 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: GERALD D KRUEH

PD

01/10/2006

Electronic Signature of Signing Officer or Director

_____ Date