2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 748348

Entity Name: BEL CANTO SINGERS, INC.

FILED Jaņ 16, 2<u>00</u>7 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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918 PINEAPPLE ROAD SOUTH DAYTONA, FL 321192543

Current Mailing Address: New Mailing Address:

918 PINEAPPLE ROAD SOUTH DAYTONA, FL 321192543

FEI Number: 59-1954899 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:

ROGERS, JUDSON 918 PINEAPPLE ROAD SOUTH DAYTONA, FL 32119 US

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:

() Change () Addition () Delete

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

Title: PD () Delete Title: PD (X) Change () Addition KRUHM, GERALD D Name: CROSSEN, DAVID W Name:

Address: 1060 RED MAPLE COURT Address: 151 BEAR FORD TRAIL City-St-Zip: NEW SMYRNA BEACH, FL 32168 City-St-Zip: ORMOND BEACH, FL 32174

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

BUNKE, JEFF Name: KRUHM, GERALD Name: 721 SLEEPY HOLLOW DRIVE 1060 RED MAPLE COURT Address: Address: City-St-Zip: PORT ORANGE, FL 32127 City-St-Zip: NEW SMYRNA BEACH, FL 32168

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

MAC DONALD, KAREN Name: BIGGS, CAROLYN Name: 6071 SABAL HAMMOCK CIR 608 PORTSIDE LANE Address: Address: City-St-Zip: PORT ORANGE, FL 32128 City-St-Zip: EDGEWATER, FL 32141

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

CAROL, LENLEAVE CAROL, LENEAVE Name: Name:

5819 SPRUCE CREEK WOODS DR. 5819 SPRUCE CREEK WOODS DR. Address: Address:

City-St-Zip: PORT ORANGE, FL 32169 City-St-Zip: PORT ORANGE, FL 32127

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

WHITEHEAD, KATHY EDDY, IRENÈ Name: Name: Address: 71 OCEAN WAY DRIVE Address: 532 HAMLET DRIVE PONCE INLET, FL 32127 City-St-Zip: PORT ORANGE, FL 32127 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: KAREN MAC DONALD Т 01/16/2007