

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 749159

FILED  
Apr 04, 2008  
Secretary of State

Entity Name: FLORIDA VOCAL ASSOCIATION, INC.

## Current Principal Place of Business:

2090 NE 65TH STREET  
FT. LAUDERDALE, FL 333081015 US

## New Principal Place of Business:

3200 N PALM AIRE DRIVE  
#610  
POMPANO BEACH, FL 33069 US

## Current Mailing Address:

2090 NE 65TH STREET  
FT. LAUDERDALE, FL 333081015 US

## New Mailing Address:

43 S POMPANO PARKWAY  
#231  
POMPANO BEACH, FL 33069 US

FEI Number: 59-1985781

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MCNAMARA, ELAINE  
2090 NE 65TH STREET  
FT. LAUDERDALE, FL 333081015 US

## Name and Address of New Registered Agent:

MCNAMARA, ELAINE  
3200 N PALM AIRE DRIVE  
#610  
POMPANO BEACH, FL 33069 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: ELAINE MCNAMARA

04/04/2008

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: MAR, DEBBIE  
Address: 8050 SW 187TH TERRACE  
City-St-Zip: MIAMI, FL 33157

Title: D ( ) Delete  
Name: CHOATE, DALE  
Address: 7823 VALLEYVIEW DRIVE  
City-St-Zip: JACKSONVILLE, FL 32211

Title: D ( ) Delete  
Name: DYE, MICHAEL  
Address: 800 E JOHN SIMS PARKWAY  
City-St-Zip: NICEVILLE, FL 325781264

Title: D ( ) Delete  
Name: BETH, CUMMINGS  
Address: 2215 SLEEPY HILL ROAD  
City-St-Zip: LAKE LAND, FL 33810

Title: D ( ) Delete  
Name: SALO, MARY CATHERINE  
Address: 706 SW 25TH AVENUE  
City-St-Zip: BOYNTON BEACH, FL 33435

Title: STD ( ) Delete  
Name: MCNAMARA, ELAINE  
Address: 2090 NE 65TH STREET  
City-St-Zip: FT. LAUDERDALE, FL 333081015

## 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  
Name:  
Address:  
City-St-Zip:

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

Title: STD (X) Change ( ) Addition  
Name: MCNAMARA, ELAINE  
Address: 3200 N PALM AIRE DRIVE, #610  
City-St-Zip: POMPANO BEACH, FL 33069 US

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: ELAINE MCNAMARA

STD

04/04/2008

Electronic Signature of Signing Officer or Director

Date