

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 754090

FILED
Apr 23, 2009
Secretary of State

Entity Name: THE MIAMI ORATORIO SOCIETY, INC.

Current Principal Place of Business:

3550 N.W. 42ND STREET
LAUDERDALE LAKES, FL 333094137

New Principal Place of Business:

Current Mailing Address:

3550 N.W. 42ND STREET
LAUDERDALE LAKES, FL 333094137

New Mailing Address:

FEI Number: 59-2514720

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CHRISTIAN, GLORIA
3550 NW 42ND ST
LAUDERDALE LAKES, FL 33309 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: PD () Delete
Name: CHRISTIAN, GLORIA
Address: 3550 N.W. 42ND STREET
City-St-Zip: LAUDERDALE LAKES, FL 333094137

Title: TD () Delete
Name: STEPHENSON, MAVIS
Address: 7917 DILIDO BLVD.
City-St-Zip: MIRAMAR, FL 33023

Title: S () Delete
Name: GORDON-MCDERMOTT, HAZEL
Address: 4446 NORTHWEST 42ND TERR
City-St-Zip: COCONUT CREEK, FL 33073

Title: PARD () Delete
Name: VAN-PUTTEN, PAUL
Address: 5256 NW 94TH TERR
City-St-Zip: SUNRISE, FL 33351

Title: VPD () Delete
Name: WINSOME, MILLER
Address: 9850 SW 8TH ST
City-St-Zip: PEMBROKE PINES, FL 33025

Title: D () Delete
Name: ANDERSON, ANDREW
Address: 13313 SW 52NS ST
City-St-Zip: MIRAMAR, FL 33027

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

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: GLORIA CHRISTIAN

PRES

04/23/2009

Electronic Signature of Signing Officer or Director

Date