

FILED
Apr 27, 2001 8:00 am
Secretary of State

04-10-2001 90006 009 *****61.25

DOCUMENT # N00000006433		Apr 27, 2001 8:00	
1. Entity Name COMMUNITY YOUTH OUTREACH CHOIR, INC.		Secretary of State	
Principal Place of Business 2112 E. JUNEAU ST. TAMPA FL 33604		Mailing Address 2112 E. JUNEAU ST. TAMPA FL 33604	
2. Principal Place of Business 2112 E. Juneau St		3. Mailing Address 2112 E. Juneau St	
City & State Tampa FL		City & State Tampa, FL	
Zip 33604		Zip 33604	
Country USA		Country USA	
4. FEI Number 59-3659866		Applied For Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent GORDON, BRIDGET O 2112 E. JUNEAU ST. TAMPA FL 33604		7. Name and Address of New Registered Agent Name: Bridget Gordon Street Address (P.O. Box Number is Not Acceptable) 2112 E. Juneau St City: Tampa FL Zip Code: 33604	
8. 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: Bridget Gordon - Bridget Gordon, President (PD) 3/12/01		DATE: 3/12/01	
FILE NOW: FEE IS \$61.25		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE: ☐ Delete		TITLE: President Director (PD) ☐ Change ☒ Addition	
NAME: ☐ Delete		NAME: Bridget O. Gordon	
STREET ADDRESS: ☐ Delete		STREET ADDRESS: 2112 E. Juneau St.	
CITY-ST-ZIP: ☐ Delete		CITY-ST-ZIP: Tampa, FL. 33604	
TITLE: ☐ Delete		TITLE: Chief Exec. Officer Director (CEO) ☐ Change ☒ Addition	
NAME: ☐ Delete		NAME: Ralph V. Brooks	
STREET ADDRESS: ☐ Delete		STREET ADDRESS: 5214 Bon Vivant Dr. Apt 43	
CITY-ST-ZIP: ☐ Delete		CITY-ST-ZIP: Tampa, FL. 33603	
TITLE: ☐ Delete		TITLE: Secretary of Treasury (STO) ☐ Change ☒ Addition	
NAME: ☐ Delete		NAME: Dottie Jo Thomas	
STREET ADDRESS: ☐ Delete		STREET ADDRESS: 7402 N. Margaret Ave.	
CITY-ST-ZIP: ☐ Delete		CITY-ST-ZIP: Tampa FL. 33612	
TITLE: ☐ Delete		TITLE: Community Relations Mgr. ☐ Change ☒ Addition	
NAME: ☐ Delete		NAME: Vickie L. Carpenter	
STREET ADDRESS: ☐ Delete		STREET ADDRESS: 2023 Waiikiri Way	
CITY-ST-ZIP: ☐ Delete		CITY-ST-ZIP: Tampa FL. 33619	
TITLE: ☐ Delete		TITLE: Contract Mgr. ☐ Change ☒ Addition	
NAME: ☐ Delete		NAME: David Middlebrooks	
STREET ADDRESS: ☐ Delete		STREET ADDRESS: 10410 Rocky River Ct.	
CITY-ST-ZIP: ☐ Delete		CITY-ST-ZIP: Tampa, FL. 33647	
TITLE: ☐ Delete		TITLE: ☐ Change ☐ Addition	
NAME: ☐ Delete		NAME: ☐ Change ☐ Addition	
STREET ADDRESS: ☐ Delete		STREET ADDRESS: ☐ Change ☐ Addition	
CITY-ST-ZIP: ☐ Delete		CITY-ST-ZIP: ☐ Change ☐ Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: Bridget Gordon		3/14/01 (813) 275-3110	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	