

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 29, 2008 8:00 am**  
**Secretary of State**

01-29-2008 90025 023 \*\*\*\*61.25

<b>DOCUMENT # N00000007875</b>					
<b>1. Entity Name</b> BWC CHORAL GROUP, INC.					
<b>Principal Place of Business</b> 2600 NE 14 ST CAUSEWAY POMPANO BEACH, FL 33062 US			<b>Mailing Address</b> 2600 NE 14 ST CAUSEWAY POMPANO BEACH, FL 33062 US		
<b>2. Principal Place of Business - No P.O. Box #</b>		<b>3. Mailing Address</b>			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	<b>4. FEI Number</b> 65-1064184	
<b>5. Certificate of Status Desired</b> <input type="checkbox"/>				<b>\$8.75 Additional Fee Required</b>	
<b>6. Name and Address of Current Registered Agent</b>  MACLEAN, LAURA G ESQ. 2600 NE 14TH STREET CAUSEWAY POMPANO BEACH, FL 33062			<b>7. Name and Address of New Registered Agent</b> Name: W. Thornton Scott, Esq. Street: c/o MacLean and Ema 2600 N.E. 14th Street Causeway City: Pompano Beach, Florida 33062		
<b>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. I am familiar with, and accept the obligations of registered agent.</b>					
SIGNATURE:				DATE: 1/21/08	
<b>Filing Fee is \$61.25</b> <b>Due by May 1, 2008</b>		<b>9. Election Campaign Financing</b> Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
<b>Make check payable to Florida Department of State</b>					
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>		
<b>TITLE</b> VPD <b>NAME</b> RICH, MARILYN <b>STREET ADDRESS</b> 1000 SW 12TH STREET #103 <b>CITY-ST-ZIP</b> FORT LAUDERDALE, FL 33315	<input type="checkbox"/> Delete		<b>TITLE</b> D <b>NAME</b> Barbara Logan <b>STREET ADDRESS</b> 6601 N.E. 21st Drive <b>CITY-ST-ZIP</b> Fort Lauderdale, Florida 33308	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
<b>TITLE</b> STD <b>NAME</b> CALEFFE, BEVERLY <b>STREET ADDRESS</b> 3101 NE 47TH COURT #307 <b>CITY-ST-ZIP</b> FORT LAUDERDALE, FL 33308	<input type="checkbox"/> Delete		<b>TITLE</b> D <b>NAME</b> Genevieve Cordes <b>STREET ADDRESS</b> 3051 N.E. 48th Street, #510 <b>CITY-ST-ZIP</b> Fort Lauderdale, Florida 33308	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
<b>TITLE</b> D <b>NAME</b> COLSON, MARYSE <b>STREET ADDRESS</b> 3501 INVERRARY DR, #204 <b>CITY-ST-ZIP</b> LAUDERHILL, FL 33319	<input checked="" type="checkbox"/> Delete		<b>TITLE</b> D <b>NAME</b> KIRK, CAROLYN E <b>STREET ADDRESS</b> 2420 NE 36TH STREET <b>CITY-ST-ZIP</b> FORT LAUDERDALE, FL 33308	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<b>TITLE</b> PD <b>NAME</b> STRASSNER, CLAIRE <b>STREET ADDRESS</b> 2900 NW 44TH ST <b>CITY-ST-ZIP</b> FORT LAUDERDALE, FL 33308	<input type="checkbox"/> Delete		<b>TITLE</b> D <b>NAME</b> KINDER, RUTH <b>STREET ADDRESS</b> 9001 NW 21ST MANOR <b>CITY-ST-ZIP</b> SUNRISE, FL 33322	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<b>12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.</b>					
<b>SIGNATURE:</b>			Date: 1-24-2008 (954) 564-2020		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Daytime Phone #		