

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000007875

FILED
Jan 21, 2009
Secretary of State

Entity Name: BWC CHORAL GROUP, INC.

Current Principal Place of Business:

2600 NE 14 ST CAUSEWAY
POMPAN0 BEACH, FL 33062 US

New Principal Place of Business:

Current Mailing Address:

2600 NE 14 ST CAUSEWAY
POMPAN0 BEACH, FL 33062 US

New Mailing Address:

FEI Number: 65-1064184

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THORNTON SCOTT, ESQ W
C/OP MACLEAN AND EMA
2600 N.E. 14TH STREET CAUSEWAY
POMPAN0 BEACH, FL 33062 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: VPD () Delete
Name: RICH, MARILYN
Address: 1000 SW 12TH STREET #103
City-St-Zip: FORT LAUDERDALE, FL 33315

Title: STD () Delete
Name: CALEFFE, BEVERLY
Address: 3101 NE 47TH COURT #307
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: D () Delete
Name: LOGAN, BARBARA
Address: 6601 N.E. 21ST DRIVE
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: D () Delete
Name: KIRK, CAROLYN E
Address: 2420 NE 36TH STREET
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: PD () Delete
Name: STRASSNER, CLAIRE
Address: 2900 NW 44TH ST
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: D () Delete
Name: KINDER, RUTH
Address: 9001 NW 21ST MANOR
City-St-Zip: SUNRISE, FL 33322

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: TD (X) Change () Addition
Name: BARROW, AMY
Address: 2803 N. OAKLAND FOREST DR
City-St-Zip: OAKLAND PARK, FL 33309

Title: SD (X) Change () Addition
Name: LOGAN, BARBARA
Address: 6601 N.E. 21ST DRIVE
City-St-Zip: FORT LAUDERDALE, FL 33308

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: CLAIRE STRASSNER

PD

01/21/2009

Electronic Signature of Signing Officer or Director

Date