2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000001323

FILED Aug 19, 2007 Secretary of State

Entity Name: THE GREATER FLORIDA MASS CHOIR, INC.

Surrent F	Principal Place of Business:	New Principal Place of Business:	
	EMEADE PLACE ETTA, GA 30004		
current N	Mailing Address:	New Mailing Address:	
PO BOX 5 TLANTA	566642 , GA 31156		
El Number n accordar	r: FEI Number Applied For() nce with s. 607.193(2)(b), F.S., the corporation di	FEI Number Not Applicable (X) Certificate of Status Desired not receive the prior notice.	d()
lame and	d Address of Current Registered Agent	: Name and Address of New Registered Agent:	
451 NW AUDERI	, CHEVONNA 72ND TERR HILL, FL 33319 US	he purpose of changing its registered office or registered agent,	ar ba
		ne purpose of changing its registered office of registered agent,	טם זכ
the Stat	e of Florida.	ne purpose of changing its registered office of registered agent,	or bo
the Stat	e of Florida. ** RE:		or bo
n the Stat SIGNATU	e of Florida. RE: Electronic Signature of Registered	Agent Date	
n the Stat	e of Florida. ** RE:		
n the Stat SIGNATU DFFICER itle: ame: ddress: ity-St-Zip: itle: ame: ddress:	e of Florida. RE: Electronic Signature of Registered S AND DIRECTORS: PD () Delete THOMAS, DANNY PO BOX 566642	Agent Date ADDITIONS/CHANGES TO OFFICERS AND DIF Title: () Change () Addition Name: Address:	
n the Stat SIGNATU DFFICER itle: ame: ddress:	RE: Electronic Signature of Registered S AND DIRECTORS: PD () Delete THOMAS, DANNY PO BOX 566642 ATLANTA, GA 31156 VP () Delete THOMAS, CHEVONNA P.O. BOX 566642	Agent Date ADDITIONS/CHANGES TO OFFICERS AND DIR Title: () Change () Addition Name: Address: City-St-Zip: Title: () Change () Addition Name: Address:	

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: CHEVONNA THOMAS VP 08/19/2007