

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000004166

FILED  
Jan 11, 2007  
Secretary of State

Entity Name: FIRST COAST CHORUS, INC.

## Current Principal Place of Business:

1140 S MCDUFF AVE  
JACKSONVILLE, FL 32205

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 37583  
JACKSONVILLE, FL 32236

## New Mailing Address:

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BLANKENSHIP, KIMBERLY ESQ  
BLANKENSHIP LAW FIRM PA  
1300 MARSH LANDING PARKWAY SUITE 108  
JACKSONVILLE BEACH, FL 32250 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: PC ( ) Delete  
Name: BOYD, JACK  
Address: 5054 RIPPLE RUSH DR N  
City-St-Zip: JACKSONVILLE, FL 32257

Title: S ( ) Delete  
Name: TAYLOR, CHERYL  
Address: 1319 DONALD ST  
City-St-Zip: JACKSONVILLE, FL 32205

Title: T ( ) Delete  
Name: RIVERA, LUIS  
Address: 3638 OAK ST  
City-St-Zip: JACKSONVILLE, FL 32205

Title: M ( ) Delete  
Name: PATTERSON, WANDA  
Address: 11425 MCCORMICK RD APT 27D  
City-St-Zip: JACKSONVILLE, FL 32225

Title: M ( ) Delete  
Name: DECKER, MONA  
Address: 8960 BROOKSHIRE CT  
City-St-Zip: JACKSONVILLE, FL 32257

## 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: M (X) Change ( ) Addition  
Name: JONES, WILLIAM  
Address: 2348 HERSCHEL ST APT 3  
City-St-Zip: JACKSONVILLE, FL 32204

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

I hereby certify that the information supplied with this filing does not qualify for the 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: LUIS RIVERA

T

01/11/2007

Electronic Signature of Signing Officer or Director

Date