2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000004166

Entity Name: FIRST COAST CHORUS, INC.

FILED Apr 29, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1140 S MCDUFF AVE 2650 PARK STREET

JACKSONVILLE, FL 32205 JACKSONVILLE, FL 32204

Current Mailing Address: New Mailing Address:

PO BOX 37583 JACKSONVILLE, FL 32236

FEI Number: 20-0730909 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BLANKENSHIP, KIMBERLY ESQ BLANKENSHIP LAW FIRM PA 1300 MARSH LANDING PARKWAY SUITE 108 JACKOSNIVLLE BEACH, FL 32250 US

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:

Name:

Clastera is Cinneting of Decistors of August

Electronic Signature of Registered Agent

Date

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

OFFICERS AND DIRECTORS:

Title: PC (X) Change () Addition

 PC
 () Delete
 Title:
 PC
 (X)

 BOYD, JACK
 Name:
 RIVERA, LUIS J

 5054 RIPPLE RUSH DR N
 Address:
 3638 OAK ST

 Address:
 5054 RIPPLE RUSH DR N
 Address:
 3638 OAK ST

 City-St-Zip:
 JACKSONVILLE, FL 32257
 City-St-Zip:
 JACKSONVILLE, FL 32205

Title: S () Delete Title: S (X) Change () Addition

Name: TAYLOR, CHERYL Name: YOCHIM, MARYANN
Address: 1319 DONALD ST Address: 3750 SILVER BLUFF

 Address:
 1319 DONALD ST
 Address:
 3750 SILVER BLUFF BLVD #2508

 City-St-Zip:
 JACKSONVILLE, FL 32205
 City-St-Zip:
 ORANGE PARK, FL 32065

Title: T () Delete Title: T (X) Change () Addition

 Name:
 RIVERA, LUIS
 Name:
 JONES, WILLIAM

 Address:
 3638 OAK ST
 Address:
 2348 HERSCHEL ST APT 3

Address: 3638 OAK ST Address: 2348 HERSCHEL STAPT 3
City-St-Zip: JACKSONVILLE, FL 32205 City-St-Zip: JACKSONVILLE, FL 32204

Name: JONES, WILLIAM Name: WHITEMAN, IRENE
Address: 2348 HERSCHEL ST APT 3 Address: 4301 CONFEDERATE POINT RD, #235

City-St-Zip: JACKSONVILLE, FL 32204 City-St-Zip: JACKSONVILLE, FL 32210

Title: M () Delete Title: M (X) Change () Addition

 Title:
 M
 () Delete
 Title:
 M
 (X) Change ()

 Name:
 DECKER, MONA
 Name:
 SOLOMON, AARON

 Address:
 8960 BROOKSHIRE CT
 Address:
 731 OAKS FIELD RD.

 City-St-Zip:
 JACKSONVILLE, FL 32257
 City-St-Zip:
 JACKSONVILLE, FL 32211

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: LUIS J. RIVERA PC 04/29/2008