2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N03000005412

RT FILED
Nov 07, 2008
Secretary of State

Entity Name: VOICES OF PRIDE-THE GAY MEN'S CHORUS OF THE PALM BEACHES INC

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

311 TWENTY EIGHTH STREET 1551 N. FLAGLER DRIVE

WEST PALM BEACH, FL 33407 US 716

WEST PALM BEACH, FL 33401 US

Current Mailing Address: New Mailing Address:

P O BOX 8555

WEST PALM BEACH, FL 33407 US

FEI Number: 65-1187987 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

LOTH, RICHARD K CAPOZZI, NEIL E

311 TWENTY EIGHTH STREET 1551 N. FLAGLER DRIVE

WEST PALM BEACH, FL 33407 US 716
WEST PALM BEACH, FL 33401 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: NEIL E. CAPOZZI 11/07/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Name: PARCELL, MICHAEL Name:

 Address:
 733 ROCKLAND DRIVE
 Address:

 City-St-Zip:
 WEST PALM BEACH, FL 33405 US
 City-St-Zip:

Title: PRES () Delete Title: () Change () Addition

 Name:
 BEAULIEU, ROBERT M
 Name:

 Address:
 931-39TH COURT
 Address:

 City-St-Zip:
 WEST PALM BEACH, FL 33407 US
 City-St-Zip:

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

Name: LOTH, RICHARD K Name: CAPOZZI, NEIL E

 Address:
 311 TWENTY EIGHTH STREET
 Address:
 1551 N. FLAGLER DRIVE #716

 City-St-Zip:
 WEST PALM BEACH, FL 33407
 City-St-Zip:
 WEST PALM BEACH, FL 33401

Title: SEC () Delete Title: () Change () Addition

 Name:
 MURRAY, KEVIN
 Name:

 Address:
 423 26TH STREET
 Address:

 City-St-Zip:
 WEST PALM BEACH, FL 33407
 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: NEIL E. CAPOZZI TREA 11/07/2008