

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 28, 2008 8:00 am
Secretary of State

03-28-2008 90033 005 ****61.25

DOCUMENT # N03000008367

1. Entity Name
TREASURE COAST COMMUNITY SINGERS INC.



Principal Place of Business
**8592 GALLBERRY CIRCLE
PORT ST. LUCIE, FL 34952**

Mailing Address
**8592 GALLBERRY CIRCLE
PORT ST. LUCIE, FL 34952**



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

03222008 Chg-NP CR2E037 (12/06)

4. FEI Number
11-3698020

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**COOK, BEVERLY J
8592 GALLBERRY CIRCLE
PORT ST. LUCIE, FL 34952**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **D** ☐ Delete
NAME **SID, BRAIN**
STREET ADDRESS **2082 SW RRCQUET CLUB DRIVE**
CITY-ST-ZIP **PALM CITY, FL 34990**

TITLE **PD** ☒ Change ☐ Addit
NAME **SID BRAIN**
STREET ADDRESS **2082 SW RACQUET CLUB DRIVE**
CITY-ST-ZIP **PALM CITY, FL. 34990**

TITLE **PPD** ☒ Delete
NAME **LONG, ELSIE**
STREET ADDRESS **445 NW BROOKVILLE COURT**
CITY-ST-ZIP **PORT ST. LUCIE, FL 34986**

TITLE ☐ Change ☐ Addit
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **SO** ☐ Delete
NAME **LAUER, JEAN**
STREET ADDRESS **420 NETTLES BLVD**
CITY-ST-ZIP **JENSEN BEACH, FL 34957**

TITLE **PE D** ☒ Change ☐ Addit
NAME **LAUER, JEAN**
STREET ADDRESS **420 NETTLES BLVD.**
CITY-ST-ZIP **JENSEN BEACH, FL. 34957**

TITLE **PD** ☐ Delete
NAME **WEITKAMP, CAROLYN F**
STREET ADDRESS **631 CALMOSO DRIVE**
CITY-ST-ZIP **PORT ST. LUCIE, FL 34983**

TITLE **PP D** ☒ Change ☐ Addit
NAME **WEITKAMP, CAROLYN F.**
STREET ADDRESS **631 CALMOSO DRIVE**
CITY-ST-ZIP **PORT ST. LUCIE, FL. 34983**

TITLE **TD** ☐ Delete
NAME **TOPPING, CHARLES A**
STREET ADDRESS **3480 SE MARNIQUE TRL**
CITY-ST-ZIP **STUART, FL 34997**

TITLE ☐ Change ☐ Addit
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☐ Delete
NAME **GRIFFIN, BONNIE**
STREET ADDRESS **6075 SW MOORE ST**
CITY-ST-ZIP **PALM CITY, FL 34990**

TITLE ☐ Change ☐ Addit
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

ATTACHMENT 40053572

N03000008367

TREASURE COAST BOARD OF DIRECTORS (CONTINUED)

D

KENNETH McMANNIS
6198 SE BLACK OAK LANE
STUART, FL. 34997

SD

LINDA MACHADO
909 NW TREASURE
STUART, FL. 34994

D

THOMAS RIBER
9603 S. INDIAN DRIVE
FORT PIERCE, FL. 34982

D

MARGARET WARONIKI
2474 SW AVONDALE ST.
PORT ST. LUCIE, FL. 34984

D

MARTY MILLER-LEVELLIE
2389 OAK RIDGE RD.
PALM CITY, FL. 34990

D

PAM WITHEE
2251 NE PINECREST LAKES BLVD.
JENSEN BEACH BLVD. FL. 34957