2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 21, 2009
Secretary of State

DOCUMENT# N04000003776

Entity Name: AVENUE "D" BOYS CHOIR INCORPORATED

Current Principal Place of Business:

8005 LAKESIDE WAY
FORT PIERCE, FL 34951

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2046
FT PIERCE, FL 34954

New Mailing Address:

FEI Number: 90-0156354 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

FOWLER, MICHAEL D ESQUIRE
1680 SW ST. LUCIE WEST BLVD.
SUITE 204
PORT ST. LUCIE, FL 34986 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:	PTD	( ) Delete
Name:	HENDRICKS, EARL	
Address:	8005 LAKESIDE WAY	
City-St-Zip:	FORT PIERCE, FL 34951	
Title:	VSD	( ) Delete
Name:	HENDRICKS, MARY	
Address:	8005 LAKESIDE WAY	
City-St-Zip:	FORT PIERCE, FL 34951	
Title:	D	( ) Delete
Name:	PLATT, EBONY	
Address:	2802 AVENUE F	
City-St-Zip:	FORT PIERCE, FL 34947	
Title:	D	( ) Delete
Name:	REED, BRENDA	
Address:	3994 SE OLD ST. LUCIE BLVD	
City-St-Zip:	STUART, FL 34996	

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:	( ) Change ( ) Addition
Name:	
Address:	
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: MARY HENDRICKS VSD 05/21/2009

Electronic Signature of Signing Officer or Director — Date