

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000007129

FILED  
Apr 27, 2009  
Secretary of State

Entity Name: SUNSATION SHOW CHORUS, INC.

## Current Principal Place of Business:

5780 86TH AVE N  
PINELLAS PARK, FL 33782

## New Principal Place of Business:

## Current Mailing Address:

5780 86TH AVE N  
PINELLAS PARK, FL 33782

## New Mailing Address:

FEI Number: 80-0114200

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SCOTT, JOAN  
5780 86TH AVE N  
PINELLAS PARK, FL 33782 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: P ( ) Delete  
Name: GAGNÉ, GENE  
Address: 4125 PK ST, N  
City-St-Zip: SAINT PETERSBURG, FL 33709

Title: VP ( ) Delete  
Name: GAGNE, DOROTHY  
Address: 4125 PARK ST N  
City-St-Zip: SAINT PETERSBURG, FL 33709

Title: S ( ) Delete  
Name: DAVIS, KATHLEEN  
Address: 10882 1112 ST, N  
City-St-Zip: LARGO, FL 33778

Title: T ( ) Delete  
Name: SCOTT, JOAN  
Address: 5780-86 AVE, N  
City-St-Zip: PINELLAS PARK, FL 33782

Title: M ( ) Delete  
Name: SETLY, SUSAN  
Address: 3315 58TH AVE #112  
City-St-Zip: PINELLAS PARK, FL 33782

Title: M ( ) Delete  
Name: SPENCER, MARY ANN  
Address: 11200 102ND AVE, # 114  
City-St-Zip: LARGO, FL 33778

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: DAUGHERTY, AJ  
Address: 6303 COLUMNS CIRCLE  
City-St-Zip: SEMINOLE, FL 33772

Title: VP (X) Change ( ) Addition  
Name: NOYES, HEIDI  
Address: 614 N.HIGHLAND AVE.  
City-St-Zip: CLEARWATER, FL 33755

Title: S (X) Change ( ) Addition  
Name: PINKARD, CHARLENE  
Address: 16940 US19, #335  
City-St-Zip: CLEARWATER, FL 337783376

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: JOAN SCOTT

T

04/27/2009

Electronic Signature of Signing Officer or Director

Date