

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000003389

FILED
May 05, 2007
Secretary of State

Entity Name: THE PHYLLIS MERRITT SINGERS, INC.

Current Principal Place of Business:

6609 CHELSEA ST
PENSACOLA, FL 32506

New Principal Place of Business:

907 CLOVERDALE COURT
FT WALTON BEACH, FL 32547

Current Mailing Address:

6609 CHELSEA ST
PENSACOLA, FL 32506

New Mailing Address:

907 CLOVERDALE COURT
FT WALTON BEACH, FL 32547

FEI Number: 20-2529776 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
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:

EDGE, MARY
6609 CHELSEA ST
PENSACOLA, FL 32506 US

Name and Address of New Registered Agent:

CHRISTENOT, GARY
907 CLOVERDALE COURT
FT WALTON BEACH, FL 32547 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: GARY CHRISTENOT

05/05/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: EDGE, MARY
Address: 6609 CHELSEA SY
City-St-Zip: PENSACOLA, FL 32506

Title: DT () Delete
Name: BURLESON, SUSAN B
Address: 1700 E GADSDEN ST
City-St-Zip: PENSACOLA, FL 32501

Title: DS () Delete
Name: WILLIAMS, TERI
Address: 828 CHALLENGER CIR N
City-St-Zip: MOBILE, AL 36608

Title: D () Delete
Name: BOUTWELL, RHONDA
Address: 4509 CREEKMOOR DR
City-St-Zip: PENSACOLA, FL 32501

Title: S () Delete
Name: WILLIAMS, TERI
Address: 828 CHALLENGER CIR N
City-St-Zip: MOBILE, AL 36608

Title: D () Delete
Name: CHRISTENOT, GARY
Address: 907 CLOVERDALE CT
City-St-Zip: FT WALTON BCH, FL 32547

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: CHRISTENOT, GARY
Address: 907 CLOVERDALE COURT
City-St-Zip: FT WALTON BEACH, FL 32547

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:

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: GARY CHRISTENOT

DP

05/05/2007

Electronic Signature of Signing Officer or Director

Date