

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000008072

FILED  
Jan 18, 2010  
Secretary of State

**Entity Name:** FESTIVAL SINGERS OF FLORIDA, INC.

**Current Principal Place of Business:**

730 HI LO WAY  
TALLAHASSEE, FL 32308

**New Principal Place of Business:**

**Current Mailing Address:**

730 HI LO WAY  
TALLAHASSEE, FL 32308

**New Mailing Address:**

**FEI Number:** 80-0248293

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FENTON, KEVIN  
730 HI LO WAY  
TALLAHASSEE, FL 32308 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  
Name: HODGES, HOLLY  
Address: 2256 CYPRESS TRACE CIRCLE  
City-St-Zip: ORLANDO, FL 32825

Title: S  
Name: DAVIS, DEBORAH  
Address: 724 TROPICAL TRAIL  
City-St-Zip: MERRITT ISLAND, FL 32952

Title: T  
Name: PECK, TABITHA  
Address: 2921 STOKLEY LANE  
City-St-Zip: TALLAHASSEE, FL 32303

Title: BM  
Name: EVANS, SCOTT  
Address: 640 S. LAKE FORMOSA DR.  
City-St-Zip: ORLANDO, FL 32803

Title: BM  
Name: STRIPLIN, CATHERINE  
Address: 3196 MT. ZION ROAD, APT. 104  
City-St-Zip: STOCKBRIDGE, GA 30281

Title: BM  
Name: GENTNER, ELLEN  
Address: 235 SHADY OAKS CIRCLE  
City-St-Zip: LAKE MARY, FL

I hereby 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 all other like empowered.

SIGNATURE: KEVIN FENTON

RA

01/18/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date