

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N10000009284

**FILED**  
**Feb 28, 2011**  
**Secretary of State**

**Entity Name:** CAPE CHORALIERS, INC.

**Current Principal Place of Business:**

3614 SE 16TH PLACE  
CAPE CORAL, FL 33904

**New Principal Place of Business:**

**Current Mailing Address:**

P. O. BOX 100651  
CAPE CORAL, FL 33910

**New Mailing Address:**

**FEI Number:** 27-3590246

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

TARGOVE, FAY  
3614 SE 16TH PLACE  
CAPE CORAL, FL 33904 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: MONTELARO, ANTHONY J  
Address: 19630 SAVANNAH ROAD  
City-St-Zip: NORTH FORT MYERS, FL 33917

Title: VP  
Name: JEDLICKA, ROSE ANNE  
Address: 2305 SE 27TH TERRACE  
City-St-Zip: CAPE CORAL, FL 33904

Title: SEC  
Name: FORLINE, BETTY M  
Address: 3711 SE 2ND PLACE  
City-St-Zip: CAPE CORAL, FL 33904

Title: TR  
Name: MONTELARO, ANTHONY J  
Address: 19630 SAVANNAH ROAD  
City-St-Zip: NORTH FORT MYERS, FL 33917

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:** ANTHONY J. MONTELARO

DIR

02/28/2011

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

\_\_\_\_\_  
Date