

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****Jul 16, 2001 08:00 AM****Secretary of State****DOCUMENT # N11616**1. Entity Name
VERO BEACH CHORAL SOCIETY, INCORPORATED

Principal Place of Business P.O. BOX 2801 VERO BEACH 32961	FL	Mailing Address P.O. BOX 2801 VERO BEACH 32961	FL
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2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State	City & State	4. FEI Number 59-2637052	Applied For ☐	Not Applicable ☒
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Zip	Country	Zip	Country	5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MCHUGH JOHN JJR 333 17TH STREET SUITE U VERO BEACH 32960 US	Name	
	Street Address (P.O. Box Number is Not Acceptable)	
	City	FL Zip Code

8. 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 _____ 07/16/2001
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstalling) DATE

FILE NOW: FEE IS \$61.25	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	Make Check Payable to Department of State
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10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
TITLE	DS	☐ Delete		TITLE	DS	☒ Change ☐ Addition	
NAME	RANDOLPH BETTY			NAME	STURGIS PAIGE		
STREET ADDRESS	3960 EIGHTH PLACE			STREET ADDRESS	995 THIRD AVENUE		
CITY-ST-ZIP	VERO BEACH FL 32960			CITY-ST-ZIP	VERO BEACH FL 32960		
TITLE	DT	☐ Delete		TITLE	DT	☒ Change ☐ Addition	
NAME	BARTON JOHN H			NAME	GRIFFIN DONNA		
STREET ADDRESS	1340 RIVER RIDGE DRIVE			STREET ADDRESS	3550 NORTH MILTON ROAD		
CITY-ST-ZIP	VERO BEACH FL 32963			CITY-ST-ZIP	FORT PIERCE FL 34946		
TITLE	DV	☐ Delete		TITLE	DV	☒ Change ☐ Addition	
NAME	SAVAGE PHIL			NAME	BARTON JOHN		
STREET ADDRESS	1720 VICTORIA CIRCLE			STREET ADDRESS	1340 RIVER RIDGE DRIVE		
CITY-ST-ZIP	VERO BEACH FL 32967			CITY-ST-ZIP	VERO BEACH FL 32963		
TITLE	DP	☐ Delete		TITLE	DP	☒ Change ☐ Addition	
NAME	YEMM HARRIET			NAME	SAVAGE PHILLIP		
STREET ADDRESS	356 LIVE OAK DRIVE			STREET ADDRESS	1720 VICTORIA CIRCLE		
CITY-ST-ZIP	VERO BEACH FL 32963			CITY-ST-ZIP	VERO BEACH FL 32967		
TITLE		☐ Delete		TITLE		☐ Change ☐ Addition	
NAME				NAME			
STREET ADDRESS				STREET ADDRESS			
CITY-ST-ZIP				CITY-ST-ZIP			
TITLE		☐ Delete		TITLE		☐ Change ☐ Addition	
NAME				NAME			
STREET ADDRESS				STREET ADDRESS			
CITY-ST-ZIP				CITY-ST-ZIP			

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: DONNA GRIFFIN DT 07/16/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #

CR2E037 (11/00)