

N15000010117

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

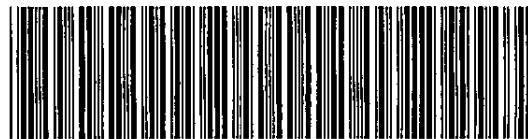
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



900291356639

10/24/16--01026--009 \*\*43.75

71.60  
16 OCT 24 PM 2:06  
SIC 114.0  
TALUANO, FL 32180

NC

OCT 26 2016

R. WHITE

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: WEST BROWARD HIGH SCHOOL CHORUS BOOSTER CLUB, INC.

DOCUMENT NUMBER: N15000010117

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

ANNA M. KOLDYS

(Name of Contact Person)

WEST BROWARD CHORUS BOOSTER CLUB INC.

(Firm/ Company)

16201 STIRLING ROAD

(Address)

SOUTHWEST RANCHES, FLORIDA 33331-1321

(City/ State and Zip Code)

anna.koldys@aol.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ANNA M. KOLDYS

954

940-8347

at

(Name of Contact Person)

(Area Code)

(Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- |  |   |   |  |
|--|---|---|--|
| <input type="checkbox"/> \$35 Filing Fee | <input checked="" type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy is<br>Enclosed) |
|--|---|---|--|

**Mailing Address**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Articles of Amendment  
to  
Articles of Incorporation  
of

FILED  
16 OCT 24 PM 2:06  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

WEST BROWARD HIGH SCHOOL CHORUS BOOSTER CLUB, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

N15000010117

(Document Number of Corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this **Florida Not For Profit Corporation** adopts the following amendment(s) to its Articles of Incorporation:

**A. If amending name, enter the new name of the corporation:**

WEST BROWARD CHORUS BOOSTER CLUB INC.

*The new*

*name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.*

**B. Enter new principal office address, if applicable:**

(Principal office address **MUST BE A STREET ADDRESS**)

16201 STIRLING ROAD

SOUTHWEST RANCHES, FLORIDA 33331-1321

**C. Enter new mailing address, if applicable:**

(Mailing address **MAY BE A POST OFFICE BOX**)

16201 STIRLING ROAD

SOUTHWEST RANCHES, FLORIDA 33331-1321

**D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:**

Name of New Registered Agent:

N/A

(Florida street address)

New Registered Office Address:

N/A

(City)

, Florida

(Zip Code)

**New Registered Agent's Signature, if changing Registered Agent:**

*I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.*

N/A

Signature of New Registered Agent, if changing

**If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:**

*(Attach additional sheets, if necessary)*

*Please note the officer/director title by the first letter of the office title:*

*P = President; V= Vice President; T= Treasurer; S= Secretary; D= Director; TR= Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.*

*Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.*

Example:

|  |           |                    |
|--|-----------|--------------------|
| <input checked="" type="checkbox"/> Change | <u>PT</u> | <u>John Doe</u>    |
| <input checked="" type="checkbox"/> Remove | <u>V</u>  | <u>Mike Jones</u>  |
| <input checked="" type="checkbox"/> Add    | <u>SV</u> | <u>Sally Smith</u> |

| <u>Type of Action</u><br>(Check One)  | <u>Title</u> | <u>Name</u>           | <u>Address</u>  |
|---|--------------|-----------------------|---|
| 1) <input type="checkbox"/> Change<br><input type="checkbox"/> Add<br><input checked="" type="checkbox"/> Remove  | <u>P</u>     | <u>CARLOS VAZQUEZ</u> | <u>935 SW 143RD TERR</u><br><u>PEMBROKE PINES, FL 33027</u>                     |
| 2) <input type="checkbox"/> Change<br><input type="checkbox"/> Add<br><input checked="" type="checkbox"/> Remove  | <u>V</u>     | <u>DEBBIE SANDS</u>   | <u>18438 NW 11 STREET</u><br><u>PEMBROKE PINES, FL</u><br><u>33029</u>          |
| 3 ) <input type="checkbox"/> Change<br><input type="checkbox"/> Add<br><input checked="" type="checkbox"/> Remove | <u>S</u>     | <u>AMY NESMITH</u>    | <u>6221 MACHESTER LANE</u><br><u>DAVIE, FL 33331</u>                            |
| 4) <input type="checkbox"/> Change<br><input type="checkbox"/> Add<br><input checked="" type="checkbox"/> Remove  | <u>BM</u>    | <u>SANDY HALL</u>     | <u>15051 N. LONGBOW BEND</u><br><u>DAVIE, FL 33331</u>                          |
| 5) <input type="checkbox"/> Change<br><input type="checkbox"/> Add<br><input checked="" type="checkbox"/> Remove  | <u>BM</u>    | <u>ALMA GONZALEZ</u>  | <u>19001 SW 57TH COURT</u><br><u>SW RANCHES, FL 33322</u>                       |
| 6) <input type="checkbox"/> Change<br><input checked="" type="checkbox"/> Add<br><input type="checkbox"/> Remove  | <u>P</u>     | <u>ANNA M. KOLDYS</u> | <u>16201 STIRLING ROAD</u><br><u>SOUTHWEST RANCHES, FL</u><br><u>33331-1321</u> |

**If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:**

*(Attach additional sheets, if necessary)*

*Please note the officer/director title by the first letter of the office title:*

*P = President; V= Vice President; T= Treasurer; S= Secretary; D= Director; TR= Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.*

*Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.*

Example:

|  |           |                    |
|--|-----------|--------------------|
| <input checked="" type="checkbox"/> Change | <u>PT</u> | <u>John Doe</u>    |
| <input checked="" type="checkbox"/> Remove | <u>V</u>  | <u>Mike Jones</u>  |
| <input checked="" type="checkbox"/> Add    | <u>SV</u> | <u>Sally Smith</u> |

| <u>Type of Action</u><br>(Check One)    | <u>Title</u> | <u>Name</u>             | <u>Address</u>               |
|---|--------------|-------------------------|------------------------------|
| 1) <input type="checkbox"/> Change      | <u>V</u>     | <u>SUSIE MANOBIANCO</u> | <u>1509 NW 158TH AVE</u>     |
| <input checked="" type="checkbox"/> Add |              |                         | <u>PEMBROKE PINES, FL</u>    |
| <input type="checkbox"/> Remove         |              |                         | <u>33028</u>                 |
| 2) <input type="checkbox"/> Change      | <u>BM</u>    | <u>JOSEE CROSBIE</u>    | <u>516 NW 208TH WAY</u>      |
| <input checked="" type="checkbox"/> Add |              |                         | <u>PEMBROKE PINES, FL</u>    |
| <input type="checkbox"/> Remove         |              |                         | <u>33029</u>                 |
| 3) <input type="checkbox"/> Change      | <u>S</u>     | <u>ALEXANDRA ELLIS</u>  | <u>18459 PINES BLVD #304</u> |
| <input checked="" type="checkbox"/> Add |              |                         | <u>PEMBROKE PINES, FL</u>    |
| <input type="checkbox"/> Remove         |              |                         | <u>33029</u>                 |
| 4) <input type="checkbox"/> Change      | <u>BM</u>    | <u>JENNIFER RECTOR</u>  | <u>16459 SW 30TH ST</u>      |
| <input checked="" type="checkbox"/> Add |              |                         | <u>MIRAMAR, FL</u>           |
| <input type="checkbox"/> Remove         |              |                         | <u>33027</u>                 |
| 5) <input type="checkbox"/> Change      | <u>BM</u>    | <u>ALDO BARDALES</u>    | <u>15812 NW 21ST ST</u>      |
| <input checked="" type="checkbox"/> Add |              |                         | <u>PEMBROKE PINES, FL</u>    |
| <input type="checkbox"/> Remove         |              |                         | <u>33028</u>                 |
| 6) <input type="checkbox"/> Change      |              |                         |                              |
| <input type="checkbox"/> Add            |              |                         |                              |
| <input type="checkbox"/> Remove         |              |                         |                              |

**E. If amending or adding additional Articles, enter change(s) here:**  
(attach additional sheets, if necessary). (Be specific)

N/A

The date of each amendment(s) adoption: N/A, if other than the date this document was signed.

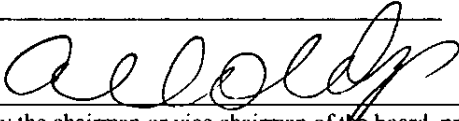
Effective date if applicable: AUGUST 30, 2016  
(no more than 90 days after amendment file date)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

- ☒ The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.
- ☐ There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated AUGUST 30, 2016

Signature   
(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

ANNA M. KOLDYS  
(Typed or printed name of person signing)

PRESIDENT  
(Title of person signing)