2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 04, 2011
Secretary of State

DOCUMENT# N17909

Entity Name: KEY CHORALE, INC.

Current Principal Place of Business:

3929 BREEZEMONT DRIVE
SARASOTA, FL 34232 US

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 20613
SARASOTA, FL 34276 US

New Mailing Address:

FEI Number: 59-2779200 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MORRIS, NANCY A TREASUR
3929 BREEZEMONT DRIVE
SARASOTA, FL 34232 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: SD
Name: OLSON, NANCY YOST
Address: 13836 SIENNA LOOP
City-St-Zip: LAKEWOOD RANCH, FL 34202 US

Title: TD
Name: MORRIS, NANCY
Address: 3929 BREEZEMONT DRIVE
City-St-Zip: SARASOTA, FL 34232 US

Title: DD
Name: BRAINERD, SUSAN
Address: 3528 FAIR OAKS LANE
City-St-Zip: LONGBOAT KEY, FL 34228 US

Title: PD
Name: GRAY, PETER
Address: 5023 TRESTLE COURT
City-St-Zip: SARASOTA, FL 34238 US

Title: VPD
Name: CRAMER, TREVOR
Address: PO BOX 4
City-St-Zip: TALLEVAST, FL 34270 US

Title: EXDR
Name: STORM, RICHARD
Address: 707 S GULFSTREAM AVENUE #307
City-St-Zip: SARASOTA, FL 34236 US

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: NANCY A MORRIS TREA 02/04/2011

Electronic Signature of Signing Officer or Director Date