

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N24520

FILED
Jun 14, 2006
Secretary of State

Entity Name: CHORAL MASTERWORKS FESTIVAL, INC.

Current Principal Place of Business:

4202 EAST FOWLER AVE
TAMPA, FL 33620

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 20591
TAMPA, FL 336220591

New Mailing Address:

FEI Number: 59-2877120 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

HIDGE, ROBERT B ESQ
14259 SHEARWATER COURT
CLEARWATER, FL 337623042 US

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: D () Delete
Name: HECK, JAMES,
Address: 531 SEVERN AVENUE
City-St-Zip: TAMPA, FL 33605

Title: C () Delete
Name: GARRETT, TATE A
Address: 210 HESPERIDES ST.
City-St-Zip: TAMPA, FL 33609

Title: VC () Delete
Name: KELLER, WILLIAM E
Address: 1 HSN DRIVE
City-St-Zip: ST. PETERSBURG, FL 33729

Title: D () Delete
Name: LEACH, L.C.
Address: 12217GLENCLIFF CIRCLE
City-St-Zip: TAMPA, FL 336262541

Title: PC () Delete
Name: HICKS, ROBERT B ESQ.
Address: 14259 SHEARWATER COURT
City-St-Zip: CLEARWATER, FL 33762

Title: D () Delete
Name: STARKEY, J. B.
Address: 14015 POINTE ANNE DR.
City-St-Zip: ODESSA, FL 33556

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: HECK, JAMES,
Address: 12912 TERRACE SPRINGS DRIVE
City-St-Zip: TEMPLE TERRACE, FL 33612

Title: PC (X) Change () Addition
Name: GARRETT, TATE A
Address: 210 HESPERIDES ST.
City-St-Zip: TAMPA, FL 33609

Title: C (X) Change () Addition
Name: KELLER, WILLIAM E
Address: 1 HSN DRIVE
City-St-Zip: ST. PETERSBURG, FL 33729

Title: VC (X) Change () Addition
Name: RUCKMAN, LYNDIA
Address: 1052 EDEN ISLE DR. NE
City-St-Zip: ST. PETERSBURG, FL 33704

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: WILLIAM E. KELLER

C

06/14/2006

Electronic Signature of Signing Officer or Director

Date