

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N36730

Entity Name: THE WILLIS BODINE CHORALE, INC.

FILED
Apr 30, 2004
Secretary of State

Current Principal Place of Business:

3838 S.W. 4TH PLACE
GAINESVILLE FL, 32607

New Principal Place of Business:

3838 S.W. 4TH PLACE
GAINESVILLE, FL 32607

Current Mailing Address:

P.O. BOX 357573
GAINESVILLE, FL 32635

New Mailing Address:

FEI Number: 59-2912026 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HENDERSON, RITA P
2628 NW 66TH TERRACE
GAINESVILLE, FL 32606 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: PD () Delete
Name: RICE, MARGARET
Address: 1362 SE CR 21-B
City-St-Zip: MELROSE, FL 32666

Title: VD () Delete
Name: KANDEL, CARL
Address: 8620 NW 13TH STREET
City-St-Zip: GAINESVILLE, FL 32655

Title: DV () Delete
Name: EDWARDS, WILLIAM
Address: 3913 SW 97TH STREET
City-St-Zip: GAINESVILLE, FL 32608

Title: SD () Delete
Name: BROWN, ELIZABETH
Address: PO BOX 197
City-St-Zip: GRANDIN, FL 32318

Title: TD () Delete
Name: HENDERSON, RITA
Address: 2628 NW 66TH TERR
City-St-Zip: GAINESVILLE, FL 32606

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VD (X) Change () Addition
Name: EDWARDS, WILLIAM
Address: 3913 SW 97TH STREET
City-St-Zip: GAINESVILLE, FL 32608

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 Section 119.07(3)(i), 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: RITA P. HENDERSON

TD

04/30/2004

Electronic Signature of Signing Officer or Director

Date