

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N46391

FILED
Jan 15, 2007
Secretary of State

Entity Name: THE SOUTH FLORIDA LAMBDA CHORALE, INC.

Current Principal Place of Business:

6278 NORTH FEDERAL HIGHWAY
#611
FORT LAUDERDALE, FL 33308

New Principal Place of Business:

Current Mailing Address:

6278 NORTH FEDERAL HIGHWAY
#611
FORT LAUDERDALE, FL 33308

New Mailing Address:

FEI Number: 65-0365732

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FIDELIBUS, FELIX
618 NE 38TH STREET
OAKLAND PARK, FL 33334 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: P () Delete
Name: OBYRN, MICHAEL
Address: 1717 NW 39TH STREET
City-St-Zip: OAKLAND PARK, FL 33334

Title: TD () Delete
Name: FIDELIBUS, FELIX L
Address: 618 NE 38TH STREET
City-St-Zip: OAKLAND PARK, FL 33334

Title: S () Delete
Name: GOLDMAN, ELLEN
Address: 651 NW 38TH PLACE
City-St-Zip: POMPANO BEACH, FL 33064

Title: REP () Delete
Name: ARTALE, ROBERT
Address: 9 NE 19TH COURT #119C
City-St-Zip: WILTON MANORS, FL 33305

Title: REP () Delete
Name: ESPOSTO, CHRISTINA
Address: 645 KENSINGTON PLACE
City-St-Zip: WILTON MANORS, FL 33305

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VP (X) Change () Addition
Name: PIETILEK, CHERYL
Address: 6278 N FEDERAL HWY 611
City-St-Zip: FORT LAUDERDALE, FL 33308

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

Title: REP (X) Change () Addition
Name: NILSEN, BRUCE
Address: 6278 N FEDERAL HWY 611
City-St-Zip: FORT LAUDERDALE, FL 33308

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: FELIX FIDELIBUS

TD

01/15/2007

Electronic Signature of Signing Officer or Director

Date