

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000000355

FILED
Apr 11, 2011
Secretary of State

Entity Name: SUNCOAST CHORALE, INC.

Current Principal Place of Business:

4480 VIA DEL VILLETTI
VENICE, FL 34293 US

New Principal Place of Business:

Current Mailing Address:

4480 VIA DEL VILLETTI
VENICE, FL 34293 US

New Mailing Address:

FEI Number: 65-0432964

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MORRISON, JOEL L
4480 VIA DEL VILLETTI
VENICE, FL 34293 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
Name: BYRON, JOAN
Address: 23519 ALLEN AVE
City-St-Zip: PT. CHARLOTTE, FL 33980

Title: VD
Name: MILNE, CATHERINE
Address: 2255 LAKEWOOD DRIVE
City-St-Zip: NOKOMIS, FL 34275

Title: TD
Name: MORRISON, JOEL
Address: 4480 VIA DEL VILLETTI
City-St-Zip: VENICE, FL 34293

Title: SD
Name: VERMETTE, SUSAN
Address: 6 LONG MEADOW RD
City-St-Zip: ROTONDA WEST, FL 33497

Title: D
Name: BYRON, RAYMOND
Address: 23159 ALLEN AVE
City-St-Zip: PORT CHARLOTTE, FL 33980

Title: D
Name: CALLAHAN, CLAIRE
Address: 201 SILVER LAKE DR #103
City-St-Zip: VENICE, FL 34292

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: JOEL MORRISON

TD

04/11/2011

Electronic Signature of Signing Officer or Director

Date