2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED Mar 21, 2007 08:00 A Secretary of State DOCUMENT # N93000002662 1. Entity Namo ANNA MARIA ISLAND COMMUNITY ORCHESTRA & CHORUS, INC. Principal Place of Business Mailing Address 1277 EDGEWATER CIRCLÉ P O BOX 1213 **BRADENTON FL 34209** HOLMES BEACH FL 34218-213 2. Principal Place of Business - No P.O Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt #, etc. 1st MOORE CR2E037 (10/06) City & State City & Stato Applied For 4. FEI Number 65-0439045 Not Applicable Ζιp Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name JEGHELIAN, ALICE Street Address (P.O. Box Number is Not Acceptable) 1277 EDGEWATER CIR. **BRADENTON FL 34209** Zip Code 8. The above named cntity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title # applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW: FEE IS \$61.25 Make Check Payable to 9. Election Campaign Financing \$5.00 May Be Due By May 1, 2007 Trust Fund Contribution Added to Fees Florida Department of State 10, OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. PD TITLE Delete TITLE Change Addition NAME HORIGAN, JOHN NAME STREET ADDRESS 16 SEASIDE COURT STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP HOLMES BEACH FL 34217 TITLE ☐ Delete T1511 ☐ Change ☐ Addition NAME PONTIUS, SUANN NAME STREET ADDRESS STREET ADDRESS 7210 20 TH AVE W CITY-ST-ZIP **BRADENTON FL 34209** CHY-ST-ZIP ☐ Addition THE U00000674738 ☐ Delete THLE Change 03/29/07-80081-008 61.25 NAME NAME JEGHELIAN, ALICE STREET ADDRESS STREET ADDRESS 1277 EDGEWATER CIR CITY-ST-ZIP CITY-ST-ZIP **BRADENTON FL 34209** THLE THILE Delete Change ☐ Addition VD NAMI. STOLTIE, JAMES NAME STREET ADDRESS STREET ADDRESS 6222 SKYWARD CT CITY+SI-ZIP CITY-ST-ZIP **BRADENTON FL 34203** Hite ☐ Delete IIILE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete Change ☐ Addition TITLE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information