2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000005508

Entity Name: LARGO HIGH CHORAL BOOSTERS, INC.

FILED Apr 18, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

C/O MR. C. WILLIAM RENFROE 410 MISSOURI AVE. LARGO, FL 33770 US

Current Mailing Address: New Mailing Address:

C/O MR. C. WILLIAM RENFROE 410 MISSOURI AVE. LARGO, FL 33770 US

FEI Number: 59-3231717 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BURRELL, CHERYL H
2833 52 WAY N
2831 52 WAY N
SAINT PETERSBURG, FL 33710 US
BENOIT, LINDA D
2225 BUENA VISTA DR.
CLEARWATER, FL 33764 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: LINDA BENOIT 04/18/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T () Delete Title: T (X) Change () Addition

 Name:
 BURRELL, CHERYL
 Name:
 BENOIT, LINDA

 Address:
 2833 52ND WAY N
 Address:
 2225 BUENA VISTA DR.

 City-St-Zip:
 SAINT PETERSBURG, FL 33710
 City-St-Zip:
 CLEARWATER, FL 33764

Title: V () Delete Title: V (X) Change () Addition

 Name:
 LEIKAM, DIANE
 Name:
 KINDELSPIRE, BECKY

 Address:
 418 5TH AVE SW
 Address:
 1201 ROSEWOOD ST.

 City-St-Zip:
 LARGO, FL 33770
 City-St-Zip:
 LARGO, FL 33770

Title: P () Delete Title: () Change () Addition

 Name:
 KEMKER, SARA
 Name:

 Address:
 12811 HARBORWOOD DR
 Address:

 City-St-Zip:
 LARGO, FL 33774
 City-St-Zip:

Title: V () Delete Title: () Change () Addition

 Name:
 LEHMANN, LISA
 Name:

 Address:
 515 CIR DR E
 Address:

 City-St-Zip:
 LARGO, FL 33770
 City-St-Zip:

 Name:
 MACIOLEK, LISA D
 Name:
 HAUMANN, CYNTHIA

 Address:
 1504 LIME ST
 Address:
 95-A WERTZ DR.

 City-St-Zip:
 CLEARWATER, FL 33756
 City-St-Zip:
 LARGO, FL 33771

I hereby certify that the information supplied with this filing does not qualify 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: LINDA BENOIT T 04/18/2009