

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000000598

FILED
Aug 15, 2006
Secretary of State

Entity Name: CHAMBER SINGERS BOOSTER CLUB, INC.

Current Principal Place of Business:

%WHISPERING PINES ELEMENTARY, MUSIC DIR.
18929 S.W. 89TH RD.
MIAMI, FL 33157

New Principal Place of Business:

Current Mailing Address:

%WHISPERING PINES ELEMENTARY, MUSIC DIR.
18929 S.W. 89TH RD.
MIAMI, FL 33157

New Mailing Address:

FEI Number: 65-0164996 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

CARVAJAL, TRISHA L
18933 SW 92 AVE
MIAMI, FL 33157 US

Name and Address of New Registered Agent:

HOUWERS, LAURA T
9020 SW 186 TERRACE
MIAMI, FL 33157 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: LAURA T. HOUWERS

08/15/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: CHAVIANO, CHRISTINA
Address: 23945 SW 147 AVE
City-St-Zip: HOMESTEAD, FL

Title: DV () Delete
Name: CARVAJAL, TRISHA
Address: 18933 SW 92 AVE
City-St-Zip: MIAMI, FL 33157

Title: DS () Delete
Name: ESTRADA, SUSAN
Address: 8812 SW 92 ST.
City-St-Zip: MIAMI, FL 33157

Title: T (X) Delete
Name: SMITH, LISA
Address: 8325 SW 172 ST.
City-St-Zip: MIAMI, FL 33157

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: HOUWERS, LAURA T
Address: 9020 SW 186 TERRACE
City-St-Zip: MIAMI, FL 33157

Title: DV (X) Change () Addition
Name: FUOG, EDITH
Address: 19441 FRANJO RD
City-St-Zip: MIAMI, FL 33157

Title: DS (X) Change () Addition
Name: ROLDAN, CARMEN
Address: 14542 SW 92 CT
City-St-Zip: MIAMI, FL 33176

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 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: LAURA T HOUWERS

DP

08/15/2006

Electronic Signature of Signing Officer or Director

Date