

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2008 8:00 am
Secretary of State

04-24-2008 90100 047 ****61.25

DOCUMENT # N95000003179 1. Entity Name THE FLORIDA VOICES ENSEMBLE, INC.					
Principal Place of Business 2727 S. TAMiami TRAIL SUITE 2 SARASOTA, FL 34239				Mailing Address P.O. BOX 15382 SARASOTA, FL 34277-1382 US	
2. Principal Place of Business - No P.O. Box # 805 PENNSYLVANIA WAY		3. Mailing Address 805 PENNSYLVANIA WAY			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		04092008 Chg-NP CR2E037 (12/06)	
City & State SARASOTA FL		City & State SARASOTA FL		4. FEI Number 65-0606291	
Zip 34243		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent JENSEN, DALE K 805 PENN. WAY SARASOTA, FL 34243				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE: DALE JENSEN 9 APRIL 08 <small>Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reissuing) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STEFFENHAGEN, DEAN 5911 LAUREL CREEK TRAIL ELLENTON, FL 34222	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/P AMY CONNORS 2420 SEATTLE SLEW DRIVE SARASOTA, FL 34240	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD O'CONNOR, TIM 217 39TH STREET NE BRADENTON, FL 34208	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S/D KIRSTEN WENZEL 5540 ROSEHILL ROAD #203 SARASOTA, FL 34233	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JENSEN, DALE 805 PENN. WAY SARASOTA, FL 34243	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T/D DALE JENSEN	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD FILSON, SUSAN P 2727 S. TAMiami TRAIL SARASOTA, FL 34239	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TIM PLAZA 5651 BIDWELL PARKWAY #104 SARASOTA, FL 34233	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD BING, KERI 1732 SIESTA DRIVE SARASOTA, FL 34239	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BETTY MULLETT 5642 MILTON AVE. SARASOTA FL 34243	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MULLETT, BETTY 4836 BLISS ROAD SARASOTA, FL 34233	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: DALE JENSEN 9 APRIL 08 941-758-0096 <small>Signature typed or printed name of signing officer or director Date Daytime Phone #</small>					