

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N95000003179

FILED
Oct 28, 2009
Secretary of State

Entity Name: THE FLORIDA VOICES ENSEMBLE, INC.

Current Principal Place of Business:

805 PENNSYLVANIA WAY
SARASOTA, FL 34243

New Principal Place of Business:

Current Mailing Address:

805 PENNSYLVANIA WAY
SARASOTA, FL 34243 US

New Mailing Address:

FEI Number: 65-0606291 **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:

JENSEN, DALE K
805 PENN. WAY
SARASOTA, FL 34243 US

Name and Address of New Registered Agent:

JENSEN, DALE K
805 PENNSYLVANIA WAY
SARASOTA, FL 34243 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: DALE K. JENSEN

10/28/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PP () Delete
Name: CONNOURS, AMY
Address: 2420 SEATTLE SLEW DRIVE
City-St-Zip: SARASOTA, FL 34240

Title: S/P () Delete
Name: WENSEL, KIRSTEN
Address: 5540 ROSEHILL ROAD #203
City-St-Zip: SARASOTA, FL 34233

Title: T/D () Delete
Name: JENSEN, DALE
Address: 805 PENN. WAY
City-St-Zip: SARASOTA, FL 34243

Title: D () Delete
Name: PLAZA, TIM
Address: 5651 BIDWELL PKWY. #1104
City-St-Zip: SARASOTA, FL 34233

Title: D () Delete
Name: MULLETT, BETTY
Address: 5642 MILTON AVE.
City-St-Zip: SARASOTA, FL 34243

Title: D (X) Delete
Name: MULLETT, BETTY
Address: 4836 BLISS ROAD
City-St-Zip: SARASOTA, FL 34233

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T/D (X) Change () Addition
Name: JENSEN, DALE
Address: 805 PENNSYLVANIA WAY
City-St-Zip: SARASOTA, FL 34243

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: DALE K. JENSEN

TREA

10/28/2009

Electronic Signature of Signing Officer or Director

Date