

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 30, 2006 8:00 am
Secretary of State

05-30-2006 90036 034 ****61.25

DOCUMENT # N97000005380

1. Entity Name
GAINESVILLE YOUTH CHORUS, INC.



Principal Place of Business
**4401 NW 31 TERRACE
GAINESVILLE, FL 32605**

Mailing Address
**P.O BOX 14294
GAINESVILLE, FL 32604**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

05182006 Chg-NP CR2E037 (4/06)

4. FEI Number
NOT APPLICABLE

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**SABATELLO, VICKI J
4401 NW 31ST TERRACE
GAINESVILLE, FL 32605**

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by September 6, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE T ☐ Delete
NAME JONES, CHANDLER
STREET ADDRESS 2531 NW 41ST STREET
CITY-ST-ZIP GAINESVILLE, FL 32606

TITLE PD ☒ Delete
NAME SABATELLA, VICKI
STREET ADDRESS 4401 NW 31ST TERRACE
CITY-ST-ZIP GAINESVILLE, FL 32605

TITLE VD ☐ Delete
NAME TERRY, LENNY
STREET ADDRESS 5922 NW 72ND ST.
CITY-ST-ZIP GAINESVILLE, FL 32653

TITLE SD ☒ Delete
NAME SYLVESTER, IRENE
STREET ADDRESS 4903 NW 40TH ST.
CITY-ST-ZIP GAINESVILLE, FL 32606

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Change ☒ Addition
NAME PERSON, WENDY
STREET ADDRESS 4155 NW 65TH TERR
CITY-ST-ZIP GAINESVILLE, FL 32605

TITLE VD ☐ Change ☒ Addition
NAME WHITAKER, BETSY
STREET ADDRESS 4714 NW 19TH AVE
CITY-ST-ZIP GAINESVILLE, FL 32606

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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: F. Chandler Jones, Jr. TREASURER
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date 5/24/06 352-571-7100