

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000000754

FILED
May 19, 2005
Secretary of State

Entity Name: TARPON SPRINGS CHORAL BOOSTERS, INC.

Current Principal Place of Business:

1411 S GULF RD
TARPON SPRINGS, FL 34689 US

New Principal Place of Business:

Current Mailing Address:

1411 S GULF RD
TARPON SPRINGS, FL 34689 US

New Mailing Address:

FEI Number: 59-3608459 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
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:

PASSARETTI, GINA M PRES
1411 S GULF RD
TARPON SPRINGS, FL 34689 US

Name and Address of New Registered Agent:

COSGROVE, CECELIA PRES
1411 S GULF RD
TARPON SPRINGS, FL 34689 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: CECELIA COSGROVE

05/19/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: PASSARETTI, GINA M
Address: 467 CARSON LANE
City-St-Zip: PALM HARBOR, FL 34684

Title: V P () Delete
Name: DONOVAN, DEBRA
Address: 1911 WOOD BEND ST.
City-St-Zip: TARPON SPRINGS, FL 34689

Title: TRES () Delete
Name: HUGHES, CYNTHIA
Address: 2095 EAST ORANGE HILL AVE.
City-St-Zip: PALM HARBOR, FL 34683

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: COSGROVE, CECELIA
Address: 500 N. HIGHLAND AVE
City-St-Zip: TARPON SPRINGS, FL 34689

Title: V P (X) Change () Addition
Name: ECONOMOS, DENA
Address: 301 FOREST HEIGHTS DR.
City-St-Zip: TARPON SPRINGS, FL 34689

Title: TRES (X) Change () Addition
Name: SCHMIDT, JANET
Address: 744 SADDLEBROOK DR
City-St-Zip: TARPON SPRINGS, FL 34689

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: CECELIA COSGROVE

PRES

05/19/2005

Electronic Signature of Signing Officer or Director

Date