

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000003699

FILED
May 01, 2007
Secretary of State

Entity Name: THE EBONY CHORALE OF THE PALM BEACHES, INC.

Current Principal Place of Business:

C/O SANJENA V. CLAY
407 MICHIGAN PLACE
WEST PALM BEACH, FL 33409

New Principal Place of Business:

Current Mailing Address:

C/O SANJENA V. CLAY
407 MICHIGAN PLACE
WEST PALM BEACH, FL 33409

New Mailing Address:

FEI Number: 65-0379536 **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:

MCBRIDE, ELIZABETH T
C/O HOLLAND & KNIGHT
701 BRICKELL AVE, SUITE 2800
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HOOKS, LEE ALLEN
Address: 3802 WESTVIEW
City-St-Zip: WEST PALM BEACH, FL 33407

Title: D () Delete
Name: PITTMAN, RALPH JR
Address: 1803 JOG RD #201
City-St-Zip: WEST PALM BEACH, FL 33407

Title: D () Delete
Name: SCRUGGS, GWENDOLYN
Address: 563 W 1ST ST
City-St-Zip: RIVIERA BCH, FL 33404

Title: FST () Delete
Name: CLAY, SANJENA V
Address: 407 MICHIGAN PLACE
City-St-Zip: WEST PALM BEACH, FL 33409

Title: V () Delete
Name: AYERS, FLOYDZELL
Address: 1340 W 34TH ST
City-St-Zip: RIVIERA BEACH, FL 33404

Title: D () Delete
Name: LAWTON, ORVILLE T
Address: 3828 HEATH CIR N
City-St-Zip: WEST PALM BEACH, FL 33407

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: () Change () Addition
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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: SANJENA V. CLAY

FST

05/01/2007

Electronic Signature of Signing Officer or Director

Date