

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000004342

FILED
Mar 05, 2004
Secretary of State**Entity Name:** CENTRAL FLORIDA MASTER CHOIR, INC.**Current Principal Place of Business:**2118 S.W. 20TH PLACE
#201
OCALA, FL 34474**New Principal Place of Business:**1111 NE 25TH AVE
S 202
OCALA, FL 34470**Current Mailing Address:**2118 S.W. 20TH PLACE
#201
OCALA, FL 34474**New Mailing Address:**1111 NE 25TH AVE
S 202
OCALA, FL 34470**FEI Number:** 59-3524125**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**SARFARAZI, FAITH A
2118 S.W. 20TH PLACE
STE. 201
OCALA, FL 34474 US**Name and Address of New Registered Agent:**MICHELL, PAMELA W
1111 NE 25TH AVE
S 202
OCALA, FL 34470 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: PAMELA W MICHELL

03/05/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: SARFARAZI, FAITH
Address: 4899 S W 2ND TERR
City-St-Zip: OCALA, FL 34474

Title: DV () Delete
Name: MCFADDEN, ELAINE
Address: 1886 E JAMES LOOP
City-St-Zip: INVERNESS, FL 33453

Title: DS () Delete
Name: MOORE, CHERYL
Address: P O BOX 43
City-St-Zip: BELLEVIEW, FL 34421

Title: DT () Delete
Name: SEDLOCK, CHERYLL
Address: P O BOX 641192
City-St-Zip: BEVERLY HILLS, FL 34464

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: MICHELL, PAMELA W
Address: 2324 SE 14TH ST
City-St-Zip: OCALA, FL 34471

Title: SEC (X) Change () Addition
Name: SAUNDERS, ALICE
Address: 814 SE 4TH ST
City-St-Zip: OCALA, FL 34471

Title: DS (X) Change () Addition
Name: TIGHT, MARY
Address: 4554 SE 13TH ST
City-St-Zip: OCALA, FL 34471

Title: DT (X) Change () Addition
Name: MCCALL, BETH
Address: 7073 SE 12TH CIR
City-St-Zip: OCALA, FL 34480

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: PAMELA W MICHELL

PRES

03/05/2004

Electronic Signature of Signing Officer or Director

Date