2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000005059

Entity Name: THE JACKSONVILLE CHILDREN'S CHORUS, INC.

FILED Apr 22, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 9818 SCOTT MILL ROAD 1100 STOCKTON STREET, ROOM G JACKSONVILLE, FL 32257 JACKSONVILLE, FL 32203 **Current Mailing Address: New Mailing Address:** P. O. BOX 41103 JACKSONVILLE, FL 32203 US FEI Number: 59-3583678 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: FISCHER, JOHN A TAYLOR, DEBORAH W 118 REGÉNTS PLACE 3945 ST. JOHNS AVENUE PONTE VEDRA, FL 32082 JACKSONVILLE, FL 32210 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: DEBORAH W. TAYLOR 04/22/2004 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete FISCHER, JOHN A AUGUSTUS, ELIZABETH Name: Name: 118 REGENTS PLACE Address: 4550 ORTEGA FOREST DRIVE Address: City-St-Zip: PONTE VEDRA, FL 32082 City-St-Zip: JACKSONVILLE, FL 32210 Title: () Delete Title: () Change () Addition GRANT, ELLEN M Name: Name: Address: 4239 ORTEGA PLACE Address: City-St-Zip: JACKSONVILLE, FL 32210 City-St-Zip: Title: () Delete Title: (X) Change () Addition CORNELIUS, JACKIE Name: TAYLOR, DEBORAH W Name: 2445 SAN DIEGO ROAD 3945 ST. JOHNS AVENUE Address: Address: City-St-Zip: JACKSONVILLE, FL 32210 City-St-Zip: JACKSONVILLE, FL 32210 Title: () Delete Title: (X) Change () Addition Name: AUGUSTUS, ELIZABETH Name: SETTLEMYER, CHARLES 4550 ORTEGA FOREST DRIVE Address: Address: 1782 OLIVE COURT City-St-Zip: JACKSONVILLE, FL 32210 City-St-Zip: ORANGE PARK, FL 32073 Title: () Delete Title: () Change () Addition FRYER, CAROL Name: Name: 12645 MISSION HILLS CIRCLE NORTH Address: Address: City-St-Zip: JACKSONVILLE, FL 32225 City-St-Zip: Title: () Delete Title: () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: ELIZABETH AUGUSTUS PD 04/22/2004

KUHN, QUIDA

3705 HILLIARD RD.

JACKSONVILLE, FL 32217

Name:

Address:

City-St-Zip:

JANE CONDON 1722 RIVER ROAD JACKSONVILLE, FLORIDA 322007