

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000006482

FILED
Apr 28, 2011
Secretary of State

Entity Name: THE JACKSONVILLE MASTERWORKS CHORALE, INC.

Current Principal Place of Business:

8031 ACORN RIDGE RD
JACKSONVILLE, FL 32256

New Principal Place of Business:

Current Mailing Address:

8031 ACORN RIDGE RD
JACKSONVILLE, FL 32256

New Mailing Address:

FEI Number: 59-3612709

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DOERR, STEPHANIE J
8031 ACORN RIDGE ROAD
JACKSONVILLE, FL 32256 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: PRES
Name: BEARDSLEE, HOWARD
Address: 1500 BISHOP ESTATE ROAD
City-St-Zip: JACKSONVILLE, FL 32259Q

Title: TREA
Name: DOERR, STEPHANIE
Address: 8031 ACORN RIDGE ROAD
City-St-Zip: JACKSONVILLE, FL 32256

Title: SECR
Name: BLOOMFIELD, SERENA
Address: 2749 CHRISTOPHER CREEK ROAD N
City-St-Zip: JACKSONVILLE, FL 32217

Title: AT-L
Name: BLOMBERG, GINGER
Address: 11916 SURFBIRD CIR
City-St-Zip: JACKSONVILLE, FL 32256

Title: AT-L
Name: BENJAMIN, HELEN
Address: 3866 SAN BERNADO DRIVE
City-St-Zip: JACKSONVILLE, FL 32217

I hereby 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 all other like empowered.

SIGNATURE: STEPHANIE J DOERR

TREA

04/28/2011

Electronic Signature of Signing Officer or Director

Date