## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N99000007162

FILED Jan 04, 2007 Secretary of State

Entity Name: THE HARMONY WINDS GOSPEL SINGERS INC.

**Current Principal Place of Business: New Principal Place of Business:** 4207 ORIENT RD TAMPA, FL 33610 US **Current Mailing Address: New Mailing Address:** 4207 ORIENT RD TAMPA, FL 33610 US FEI Number: 59-3612317 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: PITTMAN, LYNN T SR 4207 ORIENT RD. TAMPA, FL 33610 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete PITTMAN, LYNN T SR Name: Name: 4207 ORIENT RD. Address: Address: City-St-Zip: TAMPA, FL 33610 US City-St-Zip: Title: () Delete Title: VPD (X) Change ( ) Addition PITTMAN, TOMMIE C Name: PITTMAN, TOMMIE C Name: Address: 3510 22ND AVE. Address: 3501 22ND. AVE. City-St-Zip: TAMPA, FL 33605 US City-St-Zip: TAMPA, FL 33605 US Title: SVDP () Delete Title: SVPD (X) Change ( ) Addition PITTMAN, LYNN T JR PITTMAN, ETHEL M Name: Name: Address: 4207 ORIENT RD Address: 3501 22ND, AVE. City-St-Zip: TAMPA, FL 33610 US City-St-Zip: TAMPA, FL 33605 US Title: SBMD ( ) Delete Title: SEC (X) Change ( ) Addition Name: PITTMAN, FELICIA Y Name: PITTMAN, FELICIA Y 4207 ORIENT RD 4207 ORIENT RD Address: Address: City-St-Zip: TAMPA, FL 33610 US City-St-Zip: TAMPA, FL 33610 US Title: BMD ( ) Delete Title: SSEC (X) Change ( ) Addition PITTMAN, ETHEL CAPHEART, JOHNNIE M Name: Name: 3501 22ND AVE 1509 E. IDA ST. Address: Address: City-St-Zip: TAMPA, FL 33605 US City-St-Zip: TAMPA, FL 33610 Title: (X) Delete Title: () Change () Addition HEARN, DEBRA Name: Name: Address: 7920 DAHLIA AVE. Address: TAMPA, FL 33619 US City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: LYNN T. PITTMAN SR. PD 01/04/2007