

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N09000011723

**Entity Name:** MARJORY STONEMAN DOUGLAS CHORAL BOOSTERS, INC.

**FILED**  
**Apr 30, 2014**  
**Secretary of State**  
**CC8149593455**

**Current Principal Place of Business:**

11180 HERON BAY BLVD  
#823  
CORAL SPRINGS, FL 33076

**Current Mailing Address:**

11180 HERON BAY BLVD  
#823  
CORAL SPRINGS, FL 33076

**FEI Number: 01-0937635**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

FRASCHETTI, PETE  
11180 HERON BAY BLVD  
#823  
CORAL SPRINGS, FL 33076 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

**Officer/Director Detail :**

Title P  
Name FRASCHETTI, PETE  
Address 11180 HERON BAY BLVD #823  
City-State-Zip: CORAL SPRINGS FL 33076

Title VP  
Name NEWMAN, CHERYL  
Address 11180 HERON BAY BLVD #823  
City-State-Zip: PARKLAND FL 33076

Title T  
Name FOUTS, KATHY  
Address 11180 HERON BAY BLVD #823  
City-State-Zip: CORAL SPRINGS FL 33076

Title S  
Name FAST, STACIE  
Address 11180 HERON BAY BLVD #823  
City-State-Zip: CORAL SPRINGS FL 33076

*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: PETE FRASCHETTI**

**PRESIDENT**

**04/30/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date