2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N1000005473

Entity Name: MUSICA SACRA CANTORUM, INC.

Current Principal Place of Business:

3929 BREEZEMONT DR SARASOTA, FL 34232

Current Mailing Address:

P.O. BOX 50581

SARASOTA, FL 34232 US

FEI Number: 27-2822198 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MORRIS, NANCY 3929 BREEZEMONT DRIVE SARASOTA, FL 34232 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: NANCY MORRIS 01/04/2024

Electronic Signature of Registered Agent

Officer/Director Detail:

Title TREASURER Title DIRECTOR

Name MORRIS, NANCY Name HUNDER, JAMES

Address 3929 BREEZEMONT DRIVE Address 4536 GLEBE FARM RD

City-State-Zip: SARASOTA FL 34232 City-State-Zip: SARASOTA FL 34235

Title VP Title SECRETARY

Name LILLEY, RICHARD Name BRUNTS, JANICE J

Address 12814 KITE DRIVE Address 8375 GLENROSE WAY #211

City-State-Zip: BRADENTON FL 34212 City-State-Zip: SARASOTA FL 34238

Title DIRECTOR Title PRESIDENT

Name LOCKARD, BARRY Name HUNDER, JANE

Address 27 DOGWOOD BLDG. Address 4536 GLEBE FARM RD

VILLAGE OF PINEFORD City-State-Zip: SARASOTA FL 34235

City-State-Zip: MIDDLETOWN PA 17057-2508

Title DIRECTOR

Title DIRECTOR Name SMITH, JEFF

Name LETELIER, CARMEN Address 6937 COUNTRY LAKESCIRCLE

Address 12814 KITE DRIVE City-State-Zip: SARASOTA FL 34243

City-State-Zip: SARASOTA FL 34212

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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: NANCY MORRIS TREASURER 01/04/2024

Electronic Signature of Signing Officer/Director Detail

Date

FILED Jan 04, 2024

Secretary of State

8574443407CC

Date

Officer/Director Detail Continued:

Title DIRECTOR Title DIRECTOR

NameKEEN, SUZANNENameRAINES, SUSANAddress16707 BLACKWATER TERRACEAddress5707 45TH ST E

ddress 16707 BLACKWATER TERRACE Address 5707 45TH ST E LOT 179

City-State-Zip: LAKEWOOD RANCH FL 34202

City-State-Zip: BRADENTON FL 34203