

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000005059

Entity Name: THE JACKSONVILLE CHILDREN'S CHORUS, INC.**Current Principal Place of Business:**225 EAST DUVAL ST.
JACKSONVILLE, FL 32202**Current Mailing Address:**225 EAST DUVAL ST.
JACKSONVILLE, FL 32202 US**FEI Number:** 59-3583678**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**DAILEY, DARREN
225 EAST DUVAL ST.
JACKSONVILLE, FL 32202 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:** DARREN DAILEY

01/16/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title OTHER
Name ANDERSON, LEEANN
Address 934 EAGLE POINT DRIVE
City-State-Zip: ST. AUGUSTINE FL 32092

Title SECRETARY
Name BARTLEY, JEVON
Address 5080 TOPROYAL LN
City-State-Zip: JACKSONVILLE FL 32277

Title OTHER
Name DECAMP, DAVID
Address 14266 SUMMER BREEZE DRIVE E.
City-State-Zip: JACKSONVILLE FL 32218

Title CHAIRMAN
Name QUICK, CHANTELE
Address 1902 FOREST AVENUE
City-State-Zip: NEPTUNE BEACH FL 32266

Title VC
Name SOLANKA, HEATHERANN
Address 3120 HOLLOW TREE COURT
City-State-Zip: JACKSONVILLE FL 32216

Title TREASURER
Name POPKY, DANIEL
Address 305 SAN JUAN DRIVE
City-State-Zip: PONTE VEDRA BEACH FL 32082

Title OTHER
Name ONSTEAD, R. RANDALL
Address 9 DEER DANCER
City-State-Zip: SANTA FE NM 87506

Title PRESIDENT, ARTISTIC DIRECTOR
Name DAILEY, DARREN
Address 2107 PARK FOREST COURT
City-State-Zip: ORANGE PARK FL 32003

Continues on page 2

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: DARREN DAILEY**PRESIDENT AND
ARTISTIC DIRECTOR**

01/16/2018

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title OTHER
Name JOHNSON, DAVID
Address 1135 AKERS DRIVE
City-State-Zip: JACKSONVILLE FL 32225

Title OTHER
Name HEGEMAN, AMANDA
Address 124 WOODCROSS DRIVE
City-State-Zip: ST. JOHNS FL 32259

Title OTHER
Name KEMPH, LISA M.
Address 8187 PINE LAKE ROAD
City-State-Zip: JACKSONVILLE FL 32256

Title OTHER
Name GOMES, YVONNE MCCLAIN
Address 9087 BEAUCLERC CIRCLE EAST
City-State-Zip: JACKSONVILLE FL 32257