FILE NOW: FILING	FEE IS	\$61	.25
------------------	--------	------	-----

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE , Sandra B. Mortham

Secretary of State

1006

	1990	DIVISION OF CO	RPORATIONS		
DOCU 1. Corporation	MENT # 710099	(3)	• (44)		
PINFI	LAS YOUTH SYMPHONY, INC	•			
		J '		I ABBAH KABU AKBI BAHA BAKA KEK	A 1861 A 1811 A 1811 A 1861 A 1861 A 1841 A 1841 A 1861
Principal Plac	e of Business	Maling Address			
C/O TEIAH K. HESTER C/O TEIAH K. HESTER					
P.O. BOX 40044 P.O. BOX 40044					
ST. PETERS	BURG FL 33743	ST. PETERSBURG FL 33743		3. Date Incorporated or Qualified	3a. Date of Last Report
				12/27/1965	03/10/1995
	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21	26			59-6173059	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & State City & State			6. Election Campaign Financing	Fee Required	
23		28		Trust Fund Contribution	S5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for	intangible tax under s. 199.032,
24	25	29 30			Yes x No
	9. Name and Address of Current	Hegistered Agent	81 Name	10. Name and Address of New F	legistered Agent
HEGTER	TEIAU K				
HESTER, TEIAH K. 5065 31 AVE NO			82 Street	Address (P.O. Box Number is Not Acceptate	ole)
ST. PETERSBURG FL 33710		B3			
			84 City		
	<u></u>		1 1 - 7		FL 85 Zip Code
 Pursuant or registe 	to the provisions of Sections 617,0502 a	and 617.1508, Florida Statutes, the Such change was authorized by	e above-named co	orporation submits this statement for the pur board of directors. I hereby accept the app	pose of changing its registered office
familiar w	ith, and accept the obligations of, Sectio	n 617.0503, Florida Statutes.	The corporation's	board or or ectors. Thereby accept the app	omittient as registered agent. Lam
SIGNATURE	Signature, typed or printed name of registered agent ar	to the factor that the state of	gistered Agent signature in		
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFF	ICERS AND DIRECTORS IN 12
TITLE	8-	₹ DEFELE	1.1 TOLE	Secretary / D	Change K Addition
NAME	LANDRESS, SUSAN		1.2 NAME	Johnston, Sharon 12763 Cumberland	7.1
STREET ADDRESS	8178-124-STREET NORTH		1.3 STREET ADDRESS		prive 8
CITY - ST - ZIP	SEMINOLE-FL		14 CITY - ST - ZIP	Largo, FL 34643	
TITLE NAME	VOB -	₹ DELETE	21 BILE		☐ Change ☐ Addition ☐
NAME STREET ADDRESS	FLANERY, TERRY 1836-VENETIAN POINT-DRIVE-	,	2.2 NAME		
CITY - ST - ZIP	CLEARWATER FL 34615	•	2 STHEET ADDRESS		
TITLE	WD- President D	DELETE	2 4 CHY-ST-ZIP 3 1 THEE		Change Addition
NAME	CHEN, SHIRMY		3.2 NAME		
STREET ADDRESS	13291 84TH TERRACE NORTH	•	3 3 STREET ADDRESS		
CITY - ST - ZIP	SEMINOLE FL 34646		3.4 City-SI-ZIP		
TITLE	T/D	DELEJE	4.1 TITLE	· · · · · · · · · · · · · · · · · · ·	Change Addition
NAME CERTES ADDRESS	CONKLIN, REBECCA		4 2 NAME		
STREET ADDRESS	4150 48 AVENUE SOUTH ST PETERSBURG FL		4.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	P	₹ DELETE	4.4 CITY - ST - ZIP 5.1 TITLE		Change Addition
NAME	PASSMAN, JANET	F. DECE 15	52 NAME	7000017!	55147
STREET ADDRESS	-9858-83 WAY-		5.3 STREET AUDRESS	-03/22/9601)	111032
CITY-ST-ZIP	LARGO FL		5.4 CITY - ST - ZIP	***B1.25	
TITLE	VP/D	DELETE	6 1 TITLE		☐ Change ☐ Addition
NAME	Romanov, Beth	Addition	6.2 NAME		08/296
STREET ADDRESS	1925 Marla Court		6.3 STREET ADDRESS		0000
CITY - ST - ZIP	Dunedine FL 346	9.8	6 4 CITY - ST - ZIP		3-1

14. I do hereby certify that the information supplied with this filling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or man attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR