

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 710099

FILED
Jul 15, 2008
Secretary of State

Entity Name: PINELLAS YOUTH SYMPHONY, INC.

Current Principal Place of Business:

14213- 84TH TERRACE N.
SEMINOLE, FL 33776 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 4106
SEMINOLE, FL 33775

New Mailing Address:

FEI Number: 59-6173059 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

HINE, JANE T
14213 84TH TERRACE NORTH
SEMINOLE, FL 33776 US

Name and Address of New Registered Agent:

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:

Title: PD () Delete
Name: MEIROSE, LEO
Address: 5535 12TH AVE NORTH
City-St-Zip: SAINT PETERSBURG, FL 33710

Title: SD () Delete
Name: LESLIE, D'ELIA D
Address: 6371 3RD PALM POINT
City-St-Zip: SAINT PETERSBURG, FL 33706

Title: TD () Delete
Name: WAYNE, RAYMOND A
Address: 8257 FOREST CIRCLE
City-St-Zip: SEMINOLE, FL 33776

Title: D () Delete
Name: REYNOLDS, JEANNE
Address: 301 4TH ST SW
City-St-Zip: LARGO, FL 33779

Title: M () Delete
Name: HINE, JANE T
Address: 14213 84TH TERRACE NO
City-St-Zip: SEMINOLE, FL 33776

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change () Addition
Name: CREVELING, JOHN
Address: 14625 TRADITIONS DR
City-St-Zip: SEMINOLE, FL 33776

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: WAYNE A RAYMOND

DT

07/15/2008

Electronic Signature of Signing Officer or Director

Date