2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Oct 15, 2009
Secretary of State

DOCUMENT# 710099

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 ( )**

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: JANE T. HINE

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:	CREVELING, JOHN	
Address:	14625 TRADITIONS DR	
City-St-Zip:	SEMINOLE, FL 33776	
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:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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 TD 10/15/2009

Electronic Signature of Signing Officer or Director — Date