

**2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED  
Sep 14, 2007  
Secretary of State**

DOCUMENT# N97000004824

**Entity Name:** KEY WEST SYMPHONY ORCHESTRA, INC.**Current Principal Place of Business:**1025 WHITE STREET (REAR)  
KEY WEST, FL 33040**New Principal Place of Business:**3316 FLAGLER AVE  
KEY WEST, FL 33040**Current Mailing Address:**P.O. BOX 774  
KEY WEST, FL 33041**New Mailing Address:**

FEI Number: 65-0846695

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**ALFONSO, SEBRINA  
3316 FLAGLER AVE  
KEY WEST, FL 33040 US**Name and Address of New Registered Agent:**ALFONSO, SEBRINA M  
3316 FLAGLER AVE  
KEY WEST, FL 33040 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: SEBRINA M. ALFONSO

09/14/2007

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: T ( ) Change (X) Addition  
Name: DEBOER, ERIC  
Address: 1411 PINE STREET  
City-St-Zip: KEY WEST, FL 33040Title: B ( ) Change (X) Addition  
Name: LISA, TENNYSON  
Address: 1709 ROSE  
City-St-Zip: KEY WEST, FL 33040Title: S ( ) Change (X) Addition  
Name: MARILYNN, WEBER  
Address: 1218 DUVAL ST  
City-St-Zip: KEY WEST, FL 33040Title: B ( ) Change (X) Addition  
Name: DIANE, SCHMIDT  
Address: 17094 CORAL DR  
City-St-Zip: SUMMERLAND KEY, FL 33042Title: B ( ) Change (X) Addition  
Name: CYNTHIA, LAWSON S  
Address: 17375 JAMAICA LN  
City-St-Zip: KEY WEST, FL 33040Title: B ( ) Change (X) Addition  
Name: JACK, NILES III  
Address: 16 EVERGREEN AVE  
City-St-Zip: KEY WEST, FL 33040

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: SEBRINA M. ALFONSO

RA

09/14/2007

Electronic Signature of Signing Officer or Director

Date