2000 UNIFORM BUSINESS REPORT (UBR) FILED DOCUMENT # **703056** May 24, 2000 8:00 am Secretary of State 1. Entity Name SOUTHWEST FLORIDA SYMPHONY ORCHESTRA AND CHORUS 05-24-2000 90154 049 ****61.25 Mailing Address Principal Place of Business 8695 COLLEGE PKWY 8695 COLLEGE PKWY SHITE 212-1 STE. 212-1 FORT MYERS FL 33919 FORT MYERS FL 33919-4810 3. Mailing Address 2. Principal Place of Business 4560 Via Rovale 4560 Via Royale Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite 2 Suite 2 Applied For City & State City & State 4. FEI Number 59-1350404 Fort Myers, FL Not Applicable Fort Myers. Country USA Country \$8.75 Additional Zip **3**3919 5. Certificate of Status Desired Fee Required 33919 USA 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent همين در دميند بيون مدي الرائلا حدار Shirley A. Furry Address (P.O. Box Number is Not Acceptable) 4560 Via Royale, Suite 2 TAYLOR, KEVIN S 8695 COLLEGE PKWY, STE 212-1 FT. MYERS FL 33919 Zip Code 33919 Fort Myers 8. 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 4/28/00 SIGNATURE Registered Agent signature required when reinstating) 100 April 100 Ap Make Check Payable to FILE NOW: 9. Election Campaign Financing \$5.00 May Be Department of State Trust Fund Contribution. Added to Fees FEE IS \$61:25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. Addition **K**KDelete TITLE DT TITLE BOGEN, IRWIN R NAME NAME Morton Crane STREET ADDRESS STREET ADDRESS 1053 SEA HAWK LN 4864 Laurel Lane CITY-ST-ZIP CITY-ST-ZIP SANIBEL FL Fort Myers, FL 33908-2023 **KX**Change ■ Addition TITLE DC **XX**Delete TITLE BROWNELL, DIAN NAME NAME Michael K. Sheeley STREET ADDRESS STREET ADDRESS 15370 KILBIRNIE DR 15960 Cindy Lane CITY-ST-ZIP C(TY-ST-ZIP FORT MYERS FL Fort Myers, FL 33908 DC ----*Addition* - Change ~ TITLE ---- : Delete TITLE STARK, PAUL NAME NAME Michael B. Peceri STREET ADORESS STREET ADDRESS 981 SANDCASTLE RD 3350 N. Key Drive, Apt A201 CITY-ST-ZIP CITY-ST-ZIP SANIBEL FL N. Ft. Myers, FL 33903 ☐ Change ☐ Addition DS TITLE TITLE Delete KOLLMAR, DOROTHY NAME NAME STREET ADDRESS STREET ADDRESS 5206 SW 12TH PL CITY-ST-ZIP CAPE CORAL FL CITY-ST-ZIP ☐ Addition Change TITLE **XX**Delete TITLE SHEELEY, MICHAEL K NAME STREET ADDRESS STREET ADDRESS 15960 CINDY LANE CITY-ST-ZIP CITY-ST-ZIP FT MYERS FL DV ☐ Delete TITLE ☐ Change Addition TITLE NAME THOMAS, UHLER J NAME STREET ADDRESS STREET ADDRESS 9426 YUCCA CT CITY-ST-ZIP CITY-ST-ZIP SANIBEL FL 33957 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with a address, with all other like empowered.

SIGNATURE: