2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2006 8:00 am
Secretary of State
05-03-2006 90251 020 ****61.25

DOCUMENT # 703056

1. Entity Name
SOUTHWEST FLORIDA SYMPHONY ORCHESTRA AND CHORUS ASSOCIATION, INC.

60034981

Principal Place of Business	Mailing Address
4560 VIA ROYALE SUITE 2 FORT MYERS, FL 33919 US	4560 VIA ROYALE SUITE 2 FORT MYERS, FL 33919 US

04262006 Chg-NP CR2E037 (11/05)

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 59-1350404 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
FURRY, SHIRLEY A 4560 VIA ROYALE, SUITE 2 FT. MYERS, FL 33919	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DT BUTLER, RICHARD 4513 VARSITY LAKES CT LEHIGH ACRES, FL 33971	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DC TROIANO, JOSEPH A ESQ. 3474 CHARTER CLUB DR. FORT MYERS, FL 33919	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DC ROBINSON, CAROL S 1072 BREVITY LANE FORT MYERS, FL. 33919	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DS GREGORY, SCOTT 12928 KEODLESTON CIRCLE FORT MYERS, FL 33912	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DV ROBINSON, CAROL 1072 BREVITY LANE FORT MYERS, FL 33919	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DV SCHWARTZ, ROXANNE 12330 MCGREGOR PALMS DR. FORT MYERS, FL. 33908	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DV FUCH, ROBERT 15551 SHELL POINT BLVD FORT MYERS, FL 33908	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 an address, with all other like empowered.

SIGNATURE: Shirley Furry 4/24/06 (239)418-0996
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #