

**2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Feb 21, 2007  
Secretary of State**

DOCUMENT# 709141

Entity Name: SYMPHONIC BAND OF THE PALM BEACHES, INC.

**Current Principal Place of Business:**

PO BOX 16976  
W PALM BCH, FL 33416 US

**New Principal Place of Business:**

6869 HAMMOCK LANE  
W PALM BCH, FL 33411 US

**Current Mailing Address:**

PO BOX 16976  
W PALM BCH, FL 33416 US

**New Mailing Address:**

FEI Number: 59-2183803      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

WEBSTER, JOHN  
7715 ST. ANDREWS ROAD  
LAKE WORTH, FL 33467 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: TD      ( ) Delete  
Name: HAYHURST, AGNES E  
Address: 6869 HAMMOCK LN.  
City-St-Zip: ROYAL PALM BEACH, FL 33411 US

Title: SD      ( ) Delete  
Name: BERRY, PAULA  
Address: 1020 CORALLITA COURT  
City-St-Zip: WELLINGTON, FL 33414 US

Title: D      ( ) Delete  
Name: ROVINELLI, GLEN  
Address: 1746 13TH AVE NORTH  
City-St-Zip: LAKE WORTH, FL 33460 US

Title: P      ( ) Delete  
Name: TARRO, RON  
Address: 2620 DEVON CT.  
City-St-Zip: DELRAY BEACH, FL 33445 US

Title: C      ( ) Delete  
Name: SULLIVAN, GEORGE  
Address: 505 OAK TERR.  
City-St-Zip: JUPITER, FL 33458 US

Title: VP      ( ) Delete  
Name: GODWIN, MARY  
Address: 2880 ANTIETAM LANE  
City-St-Zip: WEST PALM BEACH, FL 33409 US

**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:

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

I hereby certify that the information supplied with this filing does not qualify for the 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: AGNES E. HAYHURST

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

TRES

02/21/2007

\_\_\_\_\_  
Date