

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 709141

FILED
Feb 15, 2010
Secretary of State

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

Current Principal Place of Business:

300 CRESTWOOD CT N
#303
ROYAL PALM BEACH, FL 33411 US

New Principal Place of Business:

1410 BETHPAGE WAY
GREENACRES, FL 33413 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
Name: HOOPER, CONNIE J
Address: 1410 BETHPAGE WAY
City-St-Zip: GREENACRES, FL 33413 US

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

Title: D
Name: VARNADORE, TIM
Address: 3200 HOYLAKES RD
City-St-Zip: LAKE WORTH, FL 33467 US

Title: D
Name: PETRULLO, JOE
Address: 3216 LAKESHORE DR
City-St-Zip: DEERFIELD BEACH, FL 33442 US

Title: PD
Name: BRISSON, LAURIE PD
Address: 17210 W SYCAMORE DR
City-St-Zip: LOXAHATCHEE, FL 33470 US

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

I hereby 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 all other like empowered.

SIGNATURE: CONNIE J HOOPER

TREA

02/15/2010

Electronic Signature of Signing Officer or Director

_____ Date