2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#710274

Apr 21, 2009 Secretary of State

Entity Name: BREVARD SYMPHONY ORCHESTRA, INC. **Current Principal Place of Business: New Principal Place of Business:** 1500 HIGHLAND AVENUE 1500 HIGHLAND AVENUE MELBOURNE, FL 329361965 MELBOURNE, FL 32935 **Current Mailing Address: New Mailing Address:** 1500 HIGHLAND AVENUE 1500 HIGHLAND AVENUE MELBOURNE, FL 329361965 MELBOURNE, FL 32935 FEI Number: 59-1149727 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: DELISLE, FRAN S ED 631 DATE PALM BLVD MELBOURNE, FL 32901 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition DELISLE, FRAN S EX. DIR Name: Name: PO BOX 361965 Address: Address: City-St-Zip: MELBOURNE, FL 32936 City-St-Zip: Title: VC () Delete Title: () Change () Addition BRANDON, HARRY Name: Name: Address: 103 LANSING ISLAND DR. Address: City-St-Zip: INDIAN HARBOUR BEACH, FL 32937 City-St-Zip: Title: () Delete Title: () Change () Addition CLAYBORNE, YVONNE Name: Name: 7351 OFFICE PARK PL, SUITE A Address: Address: City-St-Zip: MELBOURNE, FL 32940 City-St-Zip: Title: () Delete Title: () Change () Addition Name: MCALPINE, CHRISTOPHER Name: 951 N. WASHINGTON AVE Address: Address: City-St-Zip: TITUSVILLE, FL 32796 City-St-Zip:

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: FRAN S. DELISLE ED 04/21/2009