
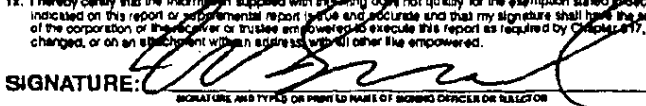


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05-07-2003 90172 010 \*\*\*\*70.00

**2003 NOT-FOR-PROFIT CORPORATION  
 UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # 713170			
1. Entity Name THE GREATER HOLLYWOOD PHILHARMONIC ORCHESTRA, INC.			
Principal Place of Business 2030 POLK STREET HOLLYWOOD, FL 33020		Mailing Address 5801 WILEY ST HOLLYWOOD, FL 33023	
2. Principal Place of Business		3. Mailing Address 5300 WASHINGTON STREET D-104	
State, Apt. #, etc.		City & State HOLLYWOOD FL	
City & State		4. FEI Number 59-2354181	
Zip 33021		Country BROWARD	
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required		6. Name and Address of Current Registered Agent SOLOMON, HAROLD 6801 WILEY ST HOLLYWOOD, FL 33023	
7. Name and Address of New Registered Agent Name: HAROLD SOLOMON Street Address (P.O. Box Number is Not Acceptable): 5835 PLUNKETT STREET City: HOLLYWOOD FL 33023		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: HAROLD SOLOMON 4/29/2003	
9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees		10. FILE NOW: FEE(S) \$31.25	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '03	
TITLE: TP NAME: TAUBMAN, ANDY STREET ADDRESS: 2 SOUTH UNIVERSITY DRIVE CITY-ST-ZIP: FORT LAUDERDALE, FL 33324	<input checked="" type="checkbox"/> Delete	TITLE: LENNIE BLOOM NAME: LENNIE BLOOM STREET ADDRESS: 713 N 31ST AVE CITY-ST-ZIP: HOLLYWOOD FL 33021	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE: PCMC NAME: SOLOMON, HAROLD A STREET ADDRESS: 6801 WILEY ST CITY-ST-ZIP: HOLLYWOOD, FL 33023	<input type="checkbox"/> Delete	TITLE: SOLOMON HAROLD NAME: SOLOMON HAROLD STREET ADDRESS: 5835 PLUNKETT STREET CITY-ST-ZIP: HOLLYWOOD FL 33023	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: SO NAME: EGERMAN, KARL STREET ADDRESS: 3660 N. 38 AVE #9 CITY-ST-ZIP: HOLLYWOOD, FL 33021	<input checked="" type="checkbox"/> Delete	TITLE: MISSY WALTISH NAME: MISSY WALTISH STREET ADDRESS: 1139 WASHINGTON STREET CITY-ST-ZIP: HOLLYWOOD, FL 33019	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE: VD NAME: BILL SHERWOOD STREET ADDRESS: 5300 WASHINGTON ST. D-104 CITY-ST-ZIP: HOLLYWOOD, FL 33024	<input type="checkbox"/> Delete	TITLE: EXEC 1ST VICE PRES NAME: EXEC 1ST VICE PRES STREET ADDRESS: CITY-ST-ZIP:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: VD NAME: STREET ADDRESS: CITY-ST-ZIP:	<input type="checkbox"/> Delete	TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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 trustee empowered to execute this report as required by Chapter 117, 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 the empowered.			
SIGNATURE: 		4/29/2003	

55050257

DIV OF CORP.  
 PO BOX 6327  
 TALL  
 77314

CRECOST (10/02)