2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#713571

Entity Name: THE FLORIDA ORCHESTRA, INC.

FILED Apr 13, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

244 2ND AVENUE N 244 2ND AVENUE N

SUITE 421 SUITE 420

ST PETERSURG, FL 33701 US ST PETERSURG, FL 33701 US

Current Mailing Address: New Mailing Address:

244 2ND AVENUE N 244 2ND AVENUE N

SUITE 421 SUITE 420

ST PETERSURG, FL 33701 US ST PETERSURG, FL 33701 US

FEI Number: 59-1223691 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

MAS, MARIANNE
244 2ND AVE N

GONTHIER, STEPHANIE
244 2ND AVE N

SUITE 421 SUITE 420

ST PETERSURG, FL 33701 US ST PETERSURG, FL 33701 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: STEPHANIE GONTHIER 04/13/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Name: NESS, DAVID Name: FARQUHAR, THOMAS
Address: P.O. BOX 14407 Address: 1901 KANSAS AVENUE N.E.

City-St-Zip: SAINT PETERSBURG, FL 33733 US City-St-Zip: SAINT PETERSBURG, FL 33703 US

Title: C () Delete Title: CHAI (X) Change () Addition Name: GILLESPIE, JAMES R Name: STARKEY, JAY B

Address: 4804 WINDHILL PALM TERRACE NE Address: 14015 POINTE ANNE DRIVE

City-St-Zip: SAINT PETERSBURG, FL 33703 US City-St-Zip: ODESSA, FL 33556 US

Title: P () Delete Title: PRES (X) Change () Addition Name: PASTREICH, MICHAEL Name: PASTREICH, MICHAEL

Address: 244 2ND AVE N Address: 244 2ND AVE N

City-St-Zip: SAINT PETERSBURG, FL 33701 City-St-Zip: SAINT PETERSBURG, FL 33701

Title: S () Delete Title: SEC (X) Change () Addition Name: BETZER, SUSAN DR Name: BETZER, SUSAN DR

Address: 461 SEVENTH AVE. S. Address: 461 SEVENTH AVE. S. City-St-Zip: ST. PETERSBURG, FL 33701 City-St-Zip: ST. PETERSBURG, FL 33701

 $\label{eq:title: VC (X) Change () Addition} \begin{picture} Title: & VC & (X) Change () Addition \\ \end{picture}$

 Name:
 HAUEISEN, WILLIAM D
 Name:
 JENKINS, HOWARD M

 Address:
 111 SECOND AVE NE SUITE 800
 Address:
 5412 LYKES LANE

 City-St-Zip:
 ST PETERSBURG, FL 33701
 City-St-Zip:
 TAMPA, FL 33611

Title: D () Delete Title: CFO (X) Change () Addition Name: PARK, RICHARD Name: GONTHIER, STEPHANIE

 Address:
 P.O. BOX 172487
 Address:
 244 2ND AVE N SUITE 420

 City-St-Zip:
 TAMPA, FL 33672
 City-St-Zip:
 ST. PETERSBURG, FL 33701

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: STEPHANIE GONTHIER CFO 04/13/2009

Electronic Signature of Signing Officer or Director

Date