

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 731901

FILED
Apr 29, 2009
Secretary of State

Entity Name: THE PENSACOLA SYMPHONY ORCHESTRA GUILD, INC.

Current Principal Place of Business:

205 E. ZARAGOZA ST
PENSACOLA, FL 32501 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1812
PENSACOLA, FL 32591 US

New Mailing Address:

FEI Number: 51-0196351

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SAULS, HARRIETT
2606 N YATES
PENSACOLA, FL 325034982 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: P () Delete
Name: RAY, CAROLYN
Address: 1200 DURNFORD PLACE
City-St-Zip: PENSACOLA, FL 32503

Title: VP () Delete
Name: USRY, DONA
Address: 6553 TERRASANTA
City-St-Zip: PENSACOLA, FL 32504

Title: VP () Delete
Name: BRADY, MARY
Address: 7303 DOWDY DRIVE
City-St-Zip: PENSACOLA, FL 32506

Title: S () Delete
Name: PLEUNE, ANN
Address: 305 PORT ROYAL WAY
City-St-Zip: PENSACOLA, FL 32502

Title: T () Delete
Name: STUMPF, SUSAN P
Address: 119 BAYOU BLVD.
City-St-Zip: PENSACOLA, FL 32503

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HINTON, MARY CATHERINE
Address: 4109 BRITTANY PLACE
City-St-Zip: PENSACOLA, FL 32504

Title: VP (X) Change () Addition
Name: WERBER, PAULA
Address: 4239 CHITTINGHAM DRIVE
City-St-Zip: PACE, FL 32571

Title: VP (X) Change () Addition
Name: PLEUNE, ANN
Address: 305 PORT ROYAL WAY
City-St-Zip: PENSACOLA, FL 32502

Title: S (X) Change () Addition
Name: BOND, PEGGY
Address: 4305 D'EVEREUX DRIVE
City-St-Zip: PENSACOLA, FL 32504

Title: () Change () Addition
Name:
Address:
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: SUSAN P. STUMPF

T

04/29/2009

Electronic Signature of Signing Officer or Director

Date