

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 732125

FILED
Jan 07, 2009
Secretary of State

Entity Name: OCALA SYMPHONY ORCHESTRA, INC.

Current Principal Place of Business:

416 SE FT. KING ST
OCALA, FL 34471

New Principal Place of Business:

416 SE FORT KING ST
OCALA, FL 34471

Current Mailing Address:

416 SE FT. KING ST
OCALA, FL 34471

New Mailing Address:

416 SE FORT KING ST
OCALA, FL 34471

FEI Number: 59-1581448

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

JAMES, TONI
416 SE FORT KING ST
OCALA, FL 34471 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: SB () Delete
Name: NASSER, SONYA
Address: 2930 SE 31ST STREET
City-St-Zip: OCALA, FL 34471

Title: PD () Delete
Name: JAMES, TONI
Address: 2253 SE 13 ST
City-St-Zip: OCALA, FL 34471

Title: VPB () Delete
Name: MILLHORN, PAULETTE
Address: 915 SE 5 ST
City-St-Zip: OCALA, FL 34471

Title: T (X) Delete
Name: NASSAL, WILLIAM
Address: 9054 SW 9TH ST RD
City-St-Zip: OCALA, FL 34481

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SB (X) Change () Addition
Name: GATTO, MARIO
Address: 1883 NW 114TH LOOP
City-St-Zip: OCALA, FL 34475

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: NASSAL, WILLIAM
Address: 9054 SW 9TH STREET ROAD
City-St-Zip: OCALA, FL 34481

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: TONI JAMES

PD

01/07/2009

Electronic Signature of Signing Officer or Director

Date