

**2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED  
Aug 25, 2009  
Secretary of State**

DOCUMENT# 761371

**Entity Name:** THE FLORIDA SYMPHONY YOUTH ORCHESTRA, INC.**Current Principal Place of Business:**812 E. ROLLINS ST.  
SUITE 300  
ORLANDO, FL 32803 US**New Principal Place of Business:****Current Mailing Address:**P.O. BOX 2328  
WINTER PARK, FL 32790**New Mailing Address:**

FEI Number: 59-2225301

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**BLAGOV, COLLEEN  
256 E. CRYSTAL LAKE ST.  
ORLANDO, FL 32806 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: PD ( ) Delete  
Name: KATZ, NORBERTO  
Address: 931 THISTLE LN N  
City-St-Zip: MAITLAND, FL 32751 USTitle: RECS ( ) Delete  
Name: JONES, SUSAN  
Address: 8610 RUNNING BEAR CT  
City-St-Zip: ORLANDO, FL 32829 USTitle: TD ( ) Delete  
Name: HENDLEY, BRETT  
Address: 1215 HOWELL CREEK DR.  
City-St-Zip: WINTER SPRINGS, FL 32708 USTitle: VP ( ) Delete  
Name: BRITTON, EDITH  
Address: 5112 TUSCAN OAK DR.  
City-St-Zip: ORLANDO, FL 32839**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:Title: RECS (X) Change ( ) Addition  
Name: WALCOTT, PAM  
Address: 14623 ROCKLEDGE GROVE CT  
City-St-Zip: ORLANDO, FL 32828 USTitle: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip: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: NORBERTO KATZ

PD

08/25/2009

Electronic Signature of Signing Officer or Director

Date