

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997
AMOUNT DUE ON OR BEFORE 9/17/97: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED

97 JUL 31 PM 2:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DOCUMENT # 763325 (8)

1. Corporation Name

BOCA CENTURY SYMPHONY ORCHESTRA, INC.

Principal Place of Business

Mailing Address

1034 EXETER B
1038 WOLVERTON B
BOCA RATON FL 33434-1515
US

SYLVIA LEITNER
1034 EXETER B
BOCA RATON FL 33434-1515
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/18/1982

3a. Date of Last Report

06/13/1996

4. FEI Number

59-2071392

Applied For
Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LEITNER, SYLVIA
1034 EXETER B
BOCA RATON FL 33434

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Sylvia Leitner

(NOTE: Registered Agent signature required when reinstating)

7/18/97

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE
NAME D
STREET ADDRESS LEITNER, FREDERICK
CITY-ST-ZIP 1034 EXETER B
BOCA RATON FL

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
400002257894-8
-08/05/97-01046-013
*****61.25 *****61.25

TITLE ☐ DELETE
NAME WASSERMAN, SEYMOUR
STREET ADDRESS GULDFORD E 482
CITY-ST-ZIP BOCA RATON, FL 00000

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME LEITNER, SYLVIA
STREET ADDRESS EXETER B 1034
CITY-ST-ZIP BOCA RATON FL

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME HADUCK, ADIE
STREET ADDRESS NEWCASTLE A 1006
CITY-ST-ZIP BOCA RATON FL

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME ALBOUM, BURT
STREET ADDRESS AINSIE D 2084
CITY-ST-ZIP BOCA RATON FL

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME MAKOSKY, ALEX
STREET ADDRESS 40 FANSHAW A
CITY-ST-ZIP BOCA RATON FL

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE SIGNATURE REQUIRED

7/18/97

561

CR2E037 (4/97)