

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 07, 2007 8:00 am
Secretary of State

05-07-2007 90056 010 ****61.25

DOCUMENT # F99000004475



1. Entity Name
SUN SYMPHONY SOCIETY, INC.

Principal Place of Business
C/O JOSEPH EGER
3240 NE 11TH ST., APT 205
POMPANO BEACH, FL 33062

Mailing Address
C/O JOSEPH EGER
3240 NE 11TH ST., APT 205
POMPANO BEACH, FL 33062

40106691



DO NOT WRITE IN THIS SPACE

02012007 No Chg-NP CR2E037 (4/06)

4. FEI Number 23-7423405	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

EGER, JOSEPH
3240 NE 11TH ST., APT 205
POMPANO BEACH, FL 33062

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IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PS EGER, JOSEPH 3240 NE 11TH ST., APT 205 POMPANO BEACH, FL 33062
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD EGER, DORITA BEH 3240 NE 11TH ST., APT 205 POMPANO BEACH, FL 33062
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FELDMAN, JANNET C 410 WEST 24TH STREET, PH #A NEW YORK, NY 10011
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CLARK, JUNE #9 GLENWOOD DRIVE DARIEN, CT 06020
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FRUMERMAN, BRUCE 222 E 93RD STREET, 25A NEW YORK, NY 10128
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FRUMERMAN, CATHY 222 E 93RD ST. 28A NEW YORK, NY 10128

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR**

Date **Apr 9, 07** **Daytime Phone**