

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000002711

FILED  
Mar 05, 2007  
Secretary of State

**Entity Name:** DAYTONA BEACH SYMPHONY SOCIETY ENDOWMENT, INC.

**Current Principal Place of Business:**

140 S. BEACH ST.,  
SUITE 107  
DAYTONA BEACH, FL 32114

**New Principal Place of Business:**

**Current Mailing Address:**

P.O.BOX 2  
DAYTONA BEACH, FL 32115

**New Mailing Address:**

**FEI Number:** 20-0305828

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

TOKAR, JOHN S  
1856 SECLUSION DR  
DAYTONA BEACH, FL 32128 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: TOKAR, JOHN S  
Address: 1856 SECLUSION DR  
City-St-Zip: DAYTONA BEACH, FL 32128

Title: VPD ( ) Delete  
Name: HARLOW, A. BROOKS JR.  
Address: 428 ROYAL CRESCENT COURT  
City-St-Zip: ST. AUGUSTINE, FL 32092

Title: TD ( ) Delete  
Name: WALDRON, EDMUND J  
Address: 125 ANN RUSTIN DR  
City-St-Zip: ORMOND BEACH, FL 32176

Title: SD ( ) Delete  
Name: WALDRON, EDMUND J  
Address: 125 ANN RUSTIN DRIVE  
City-St-Zip: ORMOND BEACH, FL 32176

Title: D ( ) Delete  
Name: GULBRANDSEN, PETER  
Address: 1889 ROYAL LYTHAM COURT  
City-St-Zip: DAYTONA BEACH, FL 32128

Title: D ( ) Delete  
Name: HUGHES, REID  
Address: 5111 S. RIDGEWOOD AVE., SUITE 202  
City-St-Zip: PORT ORANGE, FL 32127

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: VPD (X) Change ( ) Addition  
Name: HARLOW, A. BROOKS JR.  
Address: 428 CRESCENT COURT  
City-St-Zip: ST. AUGUSTINE, FL 32095

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

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

Title: ( ) 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 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: JOHN S TOKAR

PD

03/05/2007

Electronic Signature of Signing Officer or Director

Date