

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000002711

FILED
Apr 16, 2009
Secretary of State

Entity Name: DAYTONA BEACH SYMPHONY SOCIETY ENDOWMENT, INC.

Current Principal Place of Business:

926 S. RIDGEWOOD AVE.
DAYTONA BEACH, FL 32114

New Principal Place of Business:

926 S. RIDGEWOOD AVE.
DAYTONA BEACH, FL 32114

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: SHAPIRO, RON
Address: 1773 MITCHELL COURT
City-St-Zip: DAYTONA BEACH, FL 32128

Title: TD () Delete
Name: TOKAR, JOHN S
Address: 1856 SECLUSION DR.
City-St-Zip: DAYTONA BEACH, FL 32128

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

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

Title: VP (X) Change () Addition
Name: GULBRANDSEN, PETER
Address: 1889 ROYAL LYTHAM COURT
City-St-Zip: DAYTONA BEACH, FL 32128

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: JOHN S. TOKAR

TD

04/16/2009

Electronic Signature of Signing Officer or Director

Date