

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000005382

FILED
Mar 18, 2009
Secretary of State

Entity Name: LYRIC CHAMBER ORCHESTRA AT HIGHLAND BEACH, INC.

Current Principal Place of Business:

2642 CRANBROOK CT
BOYNTON BEACH, FL 33437 US

New Principal Place of Business:

Current Mailing Address:

2642 CRANBROOK CT
BOYNTON BEACH, FL 33437 US

New Mailing Address:

FEI Number: 45-0520531 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REDGRAVE & ROSENTHAL, LLP
120 EAST PALMETTO PARK ROAD
SUITE 450
BOCA RATON, FL 33432 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: D () Delete
Name: ROSEN, VERA
Address: 11836 NW 9TH ST
City-St-Zip: CORAL SPRINGS, FL 33071

Title: D () Delete
Name: DOLCE, JOSEPHINE
Address: 4740 S. OCEAN BLVD
City-St-Zip: BOCA RATON, FL 33487

Title: D () Delete
Name: GOLDEN, SHEILA
Address: 5630 KIOWA CIRCLE
City-St-Zip: BOYNTON BEACH, FL 33437

Title: D () Delete
Name: FRANK, LILLIAN
Address: 4740 S. OCEAN BLVD. APT. 203
City-St-Zip: HIGHLAND BEACH, FL 33487

Title: D () Delete
Name: STEVENS, RUTH
Address: 2642 CRAN BROOK COURT
City-St-Zip: BOYNTON BEACH, FL

Title: D () Delete
Name: SURRELLI, JOHN
Address: 3420 SOUTH OCEAN BLVD.
City-St-Zip: HIGHLAND BEACH, FL 33487

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: () Change () Addition
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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 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: RUTH STEVENS

D

03/18/2009

Electronic Signature of Signing Officer or Director

_____ Date