

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 05, 2006 8:00 am
Secretary of State

05-05-2006 90173 006 ****61.25

DOCUMENT # N04000007368

1. Entity Name

BOCA RATON PHILHARMONIC SYMPHONIA, INC.



Principal Place of Business

Mailing Address

9858 CLINT MOORE RD. C-111 #234
BOCA RATON FL 33496

9858 CLINT MOORE RD. C-111 #234
BOCA RATON FL 33496

2. Principal Place of Business

2285 POTOMAC ROAD

Suite, Apt. #, etc.

3. Mailing Address

2285 POTOMAC ROAD

Suite, Apt. #, etc.

City & State

BOCA RATON, FL

City & State

BOCA RATON, FL

Zip

33431

Country

USA

Zip

33431

Country

USA

4. FEI Number

20-1454440

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

COYNE, MARTIN L

17504 CIRCLE POND CT

BOCA RATON FL 33496

550 SE HIZNER BLVD.

APT. 707

BOCA RATON, FL 33432

Name

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

City

FL

Zip Code

8. The above named agent 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 obligation of registered agent.

SIGNATURE

(NOTE: Registered Agent signature required when resigning)

DATE

FILE NOW: FEE IS \$61.25

Due By May 1, 2006

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete
NAME COYNE, MARTIN L
STREET ADDRESS 17504 CIRCLE POND CT
CITY-ST-ZIP BOCA RATON FL 33496

TITLE VD ☐ Delete
NAME TURKIN, MARSHALL
STREET ADDRESS 6460 QUINTANA PLACE
CITY-ST-ZIP BOCA RATON FL 33433

TITLE S ☐ Delete
NAME DUVALL, MILLICENT E
STREET ADDRESS 6850 GRANDE DR N
CITY-ST-ZIP BOCA RATON FL 33433-2735

TITLE TD ☐ Delete
NAME SAVARICK, MADELYN
STREET ADDRESS 5466 STEEPLE CHASE
CITY-ST-ZIP BOCA RATON FL 33496

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

Martin L. Coyne

PRESIDENT

APR 25 2006 561-417-6743