2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000003717

FILED May 24, 2010 Secretary of State

Entity Name: TALLAHASSEE YOUTH ORCHESTRAS, INC.

New Principal Place of Business: Current Principal Place of Business:

1415 TIMBERLANE ROAD SUITE 209

TALLAHASSEE, FL 32312

Current Mailing Address: New Mailing Address:

1415 TIMBERLANE ROAD SUITE 209 TALLAHASSEE, FL 32312

FEI Number: 26-4672380 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

ALVES, JAMES S SAUER, AMANDA

123 SOUTH CALHOUN STREET 1415 TIMBERLANE ROAD

STE 209 TALLAHASSEE, FL 32301

TALLAHASSEE, FL 32312 US

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: AMANDA SAUER 05/24/2010

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

WILSON, RHONDA Name: Address: 720 RED FERN ROAD City-St-Zip: TALLAHASSEE, FL 32308

Title:

Name: ATKINS, TERESA Address: 5999 HARDY CROOM CT. City-St-Zip: TALLAHASSEE, FL 32312

Title: VΡ

SHAFTEL, MATTHEW Name: Address: 3466 PACES FERRY ROAD City-St-Zip: TALLAHASSEE, FL 32309

Title:

Name: HENDRIX, TIMOTHY 3448 GARDENVIEW WAY Address: City-St-Zip: TALLAHASSEE, FL 32309

Title:

KEMPER, KIRBY Name: 550 LITCHFIELD ROAD Address: TALLAHASSEE, FL 32312 City-St-Zip:

Title:

PENDLETON, MARGARET Name: Address: 2505 BETTON WOODS DR. TALLAHASSEE, FL 32308 City-St-Zip:

I hereby 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 all other like empowered.

SIGNATURE: AMANDA SAUER DR. 05/24/2010

Electronic Signature of Signing Officer or Director

Date