


# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 14, 2008 8:00 am**  
**Secretary of State**

01-14-2008 90099 009 \*\*\*\*61.25

<b>DOCUMENT # N11066</b>			
1. Entity Name <b>BREVARD SYMPHONY YOUTH ORCHESTRA ASSOCIATION, INC.</b>			
Principal Place of Business <b>1500 HIGHLAND AVE MELBOURNE, FL 32935 US</b>		Mailing Address <b>P.O. BOX 360553 MELBOURNE, FL 32936-0553</b>	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip		Country	

40000000



01092008 Chg-NP CR2E037 (12/06)

4. FEI Number **59-2601828** Applied For  Not Applicable

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

<b>6. Name and Address of Current Registered Agent</b>				<b>7. Name and Address of New Registered Agent</b>			
<b>UPTON, MARTI Marti</b> 108 BOSKIND RD. INDIALANTIC, FL 32903				Name			
				Street Address (P.O. Box Number is Not Acceptable)			
				City			
				<b>FL</b>		Zip Code	

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE  **Marti Upton, Executive Director** 1/9/08  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing) DATE

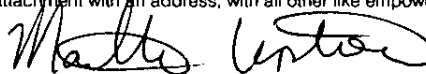
**Filing Fee is \$61.25  
Due by May 1, 2008**

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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	V	<input checked="" type="checkbox"/> Delete	TITLE	Secretary	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	PUFAHL, VERCIE		NAME	Maureen Baldino	
STREET ADDRESS	2881 PEMBROKE RD		STREET ADDRESS	11 West Point Drive	
CITY-ST-ZIP	MELBOURNE, FL 32935		CITY-ST-ZIP	COLOA BEACH, FL 32931	
TITLE	P	<input type="checkbox"/> Delete	TITLE	Vice President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ALLENDER, STEVEN		NAME	Janice Wahl	
STREET ADDRESS	118 COUNTRY CLUB DR		STREET ADDRESS	1061 S. Wickham Road	
CITY-ST-ZIP	TITUSVILLE, FL 32780		CITY-ST-ZIP	Melbourne, FL 32904	
TITLE	D	<input type="checkbox"/> Delete	TITLE	Vice President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	KING, SHEILA		NAME	Mary Ellen Galanopoulos	
STREET ADDRESS	3730 OAKHILL DRIVE		STREET ADDRESS	440 Angelo Lane	
CITY-ST-ZIP	TITUSVILLE, FL 32780		CITY-ST-ZIP	Cocoa Beach, FL 32931	
TITLE	D	<input type="checkbox"/> Delete	TITLE	Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ERICKSON, SHIRLEY		NAME	Gloria Hunt	
STREET ADDRESS	2192 HERITAGE DR.		STREET ADDRESS	2886 Long Lake Drive	
CITY-ST-ZIP	TITUSVILLE, FL 32780		CITY-ST-ZIP	TITUSVILLE, FL 32780	
TITLE	T	<input type="checkbox"/> Delete	TITLE	Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	NEMEROFF, BRIAN		NAME	Christine Givens	
STREET ADDRESS	8035 SPYGLASS HILL RD.		STREET ADDRESS	2500 Long Sandy Circle	
CITY-ST-ZIP	MELBOURNE, FL 32940		CITY-ST-ZIP	Meritt Island, FL 32952	
TITLE		<input type="checkbox"/> Delete	TITLE	Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME			NAME	Joyce Wilden	
STREET ADDRESS			STREET ADDRESS	6905 N. Wickham Road, Ste. 401	
CITY-ST-ZIP			CITY-ST-ZIP	Melbourne FL 32940	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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  **Marti Upton, Executive Director** 1/9/08 321-254-9583