

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N20837

FILED
Mar 29, 2006
Secretary of State

Entity Name: CHARLOTTE SYMPHONY ORCHESTRA, INC.

Current Principal Place of Business:

22119 ELMIRA BLVD
PORT CHARLOTTE, FL 33952 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 495831
PORT CHARLOTTE, FL 339495831 US

New Mailing Address:

FEI Number: 59-2029342

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LIOON, PAUL V
22119 ELMIRA BLVD
PORT CHARLOTTE, FL 33952 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: MONDELLO, KATE
Address: 3252 VILLAGE LANE
City-St-Zip: PORT CHARLOTTE, FL 33953

Title: TD () Delete
Name: LIOON, PAUL V
Address: 1486 WASSAIL LN
City-St-Zip: PORT CHARLOTTE, FL 33983

Title: SD () Delete
Name: BAUMGARTNER, LARRY
Address: 21044 CHURON AVE
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: VD () Delete
Name: WEBB, ELLEN
Address: 99 NESBITT ST.
City-St-Zip: PUNTA GORDA, FL 33950 US

Title: VD () Delete
Name: HAU, JANITA
Address: 12626 SHERI STREET S.W.
City-St-Zip: LAKE SUZY, FL

Title: VD () Delete
Name: STEIN, LEE M
Address: P.O. BOX 495831
City-St-Zip: PORT CHARLOTTE, FL 33949 US

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: VD (X) Change () Addition
Name: WEBB, ELLEN
Address: 3436 NIGHTHAWK
City-St-Zip: PUNTA GORDA, FL 33950 US

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 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: PAUL LIOON

TD

03/29/2006

Electronic Signature of Signing Officer or Director

Date