FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT #

N27603

(2)

YOUTH	ORCHESTRA	OF	FLORIDA.	INCORPORATED

Principal Place of Business Mailing Address						<u> </u>	
1708 NO. 40 AVE. 1708 NO. 40 AVE. HOLLYWOOD FL 33021 HOLLYWOOD FL 33021			21				
					3. Date Incorporated or Qualified 07/26/1988	3a. Date of Last 01/30/1	
2. Principal Place of Business 2a. Mailing Address		<u> </u>			4. FEI Number		Applied For
21		26 Suite, Apt. #, etc.		·	65-0063799		Not Applicable
Suite, Apt. #, etc. 5			Suite, Apr. #, etc.		5. Certificate of Status Desired	8.7	Additional Required
City & State		City & State	 		Election Campaign Financing Trust Fund Contribution		O May Be d to Fees
Ζιρ	Zip Country Zip		Country		This corporation has liability for intangible tax under s. 199,032,		
24	25	29	30		Florida Statutes 🔲 Yes 🖾 No		
	9. Name and Address of Curre	nt Registered Agent	81	Name	10. Name and Address of New Ro	egistered Agent	
	4 43 4 PM L L A			Ivanie			
DIXON, 1721 WI	Myhna Hitehall dr apt 206		82	Street Ac	idress (P.O. Box Number is Not Acceptable	e)	
	DERDALE FL 33324		83				
			84	City		FL 85 Zip	p Code
11. Pursuant t	to the provisions of Sections 617.050	2 and 617.1508, Florida Statu	tes, the above	named corp	oration submits this statement for the purp	cone of observing ite r	egistered office
or register familiar wit	ed agent, or both, in the State of Fio th, and accept the obligations of, Sec	rida. Such change vias authori ction 617.0503, Flor da Statute	ized by the corp is.	poration's bo	pard of directors. I hereby accept the appo	intment as registered	agent. I am
SIGNATURE .	Signature typed or printed name of redistered and	Mykna Di nt and title d'applicable (h	xon Ti	reasur	rec/Directors used when reinstating)	1-18-96	
12.		ND DIRECTORS	13.	an agradore requ	ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTO	DRS IN 12
TITLE	TD*	DELETE	1.1 TITLE	7	DICAMA	Change	Addition
NAME	MYRNA DIXON		12 NAME		Camp, Melane 2841 NE 21 st. Court	•	
STREFT ADDRESS	1721 WHITEHALL DR APT 2	06	1.3 STREE	T ADDRESS	2841' NE 21 st. Coud		
CITY - ST - ZIP	FT LAUDERDALE FL		1.4 CITY -	ST - ZIP	Ft. Landerdoly Florida		
TITLE	% D	DELETE	2 1 TIFLE		5.D	☐ Change	Addition
NAME	CAMP, MELANIE		2 2 NAME		Leslie Bahler		
STREET ADDRESS	2017 112 2101 01		2 3 STREE	T ADDRESS	1 1041 14 10: 03		
CITY-ST-ZIP	FT. LAUDERDALE FL	LIDELLIC	2 4 CITY	· ST · ZIP	handes hakes, Fhorida	<u> 33307</u>	- Tables
TITLE	D COMP	DELETE	3.1 THE			☐ Change	☐ Addition
NAME CERCET ADORESC	LEWIS, OVID		3 2 NAME				
STREET ADDRESS	3301 COLLEGE AVE.			T ADDRESS			
CITY+ST+ZIP TITLE	FT. LAUDERDALE FL PC	DELETE	3.4. CITY - 4.1 TITLE	-21-ZIP		Change	Addition
NAME	WEAVER, BOB	hand order to	4.1 MILE			change	
STREET ADDRESS	1708 N. 40 AVE.		1	T ADDRESS			
CITY-ST-ZIP	HOLLYWOOD FL		4.4 CITY-				
TITLE	SDV	DELETE	51 TITLE			Change	Addition
NAME	WEAVER, MYRA		52 NAME				
STREET ADORESS	1708 N. 40 AVE.		53 STREE	T ADDRESS			
CITY - ST - ZIP	HOLLYWOOD FL		5.4 CITY-	ST-ZIP			
TITLE	DV	DELETE	61 TITLE			Change	Addition
NAME	DEICKE, LOIS (MRS)		62 NAME				l
STREET ADDRESS	309 FARMINGTON DR		63 STREE	T ADDRESS			
CITY-ST-ZIP	PLANTATION FL		6 4 CITY -				
14. I do hereb	y certify that the information supplied	l with this filing is voluntarily ful	rnished and do	es not qualif	y for the exemption stated in Section 119.0	J7(3)(k), Florida Statu	tes. I further

certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or man attachment with an address.

SIGNATURE: My My My Dix on Treasurer Director 1-18-96

Description 1-18-96

Legistre Prone 1-954-423-4333