

**2006 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**

**Apr 19, 2006 08:00 AM  
Secretary of State**

**DOCUMENT # N39273**

1. Entity Name  
**ORLANDO SYMPHONY ORCHESTRA SOCIETY, INC.**



Principal Place of Business  
**718 SOUTH LAKE FORMOSA DR  
ORLANDO FL 32803 US**

Mailing Address  
**PO BOX 533831  
ORLANDO FL 32853 US**



04152006 No Chg-NP

CR2E037 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**59-3034747**

Applied For  
☐ Not Applicable

5. Certificate of Status Desired



**\$8.75 Additional  
Fee Required**

**6. Name and Address of Current Registered Agent**

**BARTLETT, HAMILTON A.S.  
820 MAURY ROAD, #29  
ORLANDO, FL 32804**

**DO NOT WRITE  
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$81.25  
Due by May 1, 2006**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

U00000519603  
05/02/06-80059-014 70.00

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BARTLETT, HAMILTON 850 MAURY ROAD, #29 ORLANDO, FL 32804
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD WEISS, JERRY 718 SOUTH LAKE FORMOSA DRIVE ORLANDO, FL 32803
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD WEISS, JILL 718 SOUTH LAKE FORMOSA DRIVE ORLANDO, FL 32803
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

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:**

**JERRY WEISS**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**Apr 14, 2006**

Date

**407 2288414**

Daytime Phone #