


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 17, 2007 08:00 AM
Secretary of State

DOCUMENT # N42601 1. Entity Name THE ORLANDO PHILHARMONIC ORCHESTRA, INC.	
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Principal Place of Business 812 E ROLLINS STREET ORLANDO, FL 32803 US	Mailing Address 812 E ROLLINS STREET ORLANDO, FL 32803 US
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DO NOT WRITE IN THIS SPACE



01052007 No Chg-NP CR2E037 (4/06)

4. FEI Number 59-3058884	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent SCHILLHAMMER, DAVID 812 E. ROLLINS ST. ORLANDO, FL 32803	DO NOT WRITE IN THIS SPACE
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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25 Due by May 1, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TBD TEEL, JAMES 500 N. INTERLACHEN WINTER PARK, FL 32789
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PBD CASEBIER, JOHN 741 DIXIE PARKWAY WINTER PARK, FL 32789
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SBD CURRAN, SUSAN 2338 C S CONWAY RD ORLANDO, FL 32812
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPBD CONNER, CAROL 4750 NEW BROAD ST ORLANDO, FL 32814
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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U00000588662
01/17/07-80083-004 61.25

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: David Schillhammer 1/15/07 407(x96-6700)
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #