


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2005 8:00 am
Secretary of State

04-13-2005 90040 002 ****70.00

DOCUMENT # N93000002899		
1. Entity Name THE SYMPHONIC BAND OF AMERICA, INC.		

Principal Place of Business 8870 SE HAWKSBILL WAY HOBE SOUND, FL 33455 US	Mailing Address P.O. BOX 8395 HOBE SOUND, FL 33475-8395 US
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2. Principal Place of Business HOBE SOUND PRESBYTERIAN CHURCH SE ADONIS STREET HOBE SOUND, FL 33455	Mailing Address P.O. 8395 HOBE SOUND, FL 33475
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City & State HOBE SOUND, FL	City & State HOBE SOUND, FL
Zip 33455	Zip 33475
Country MARTIN	Country MARTIN

6. Name and Address of Current Registered Agent BLAHUN, GEORGE 8870 SE HAWKSBILL WAY HOBE SOUND, FL 33455	
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20031508

03072005 Chg-NP CR2E037 (10/03)

4. FEI Number 65-0437465	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	

7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	
FL	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: GEORGE BLAHUN *George Blahun* 3/16/05
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when registering) DATE

Filing Fee is \$61.25 Due by May 1, 2005	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DD BITGOOD, ROBERTA DR. 13 BEST VIEW RD. QUAKER HILL, CT 06375 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DD CHEYNEY, LIZ-LYNCH 51 TRUMBALL AVE. HOBE SOUND, FL 33455 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DD BLAHUN, GEORGE JR. 7 MAMACOCKE RD. QUAKER HILL, CT 06375 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DUNPHY, MARILYN 8 NOTTINGHAM RD. OLD LYME, CT 06371 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DD STROTHER, BARBARA 75 STEAMBOAT WHARF MYSTIC, CT 063552748 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DD RHODES, DIANE 175 GREAT MEEK ROAD WATERFORD, CT 063853739 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: GEORGE BLAHUN *George Blahun* 3/16/05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone