

**2007 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 23, 2007 8:00 am**  
**Secretary of State**

04-23-2007 90272 002 \*\*\*\*61.25

40077949



04162007 Chg-NP CR2E037 (12/06)

4. FEI Number 65-0612377 Applied For Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

DOCUMENT # N94000006259

1. Entity Name  
SYMPHONY BAY ASSOCIATION, INC.



Principal Place of Business  
9446 FOX TROT  
BOCA RATON, FL 33496

Mailing Address  
20423 ST RD 7  
SUITE F6, PMB 505  
BOCA RATON, FL 33498 US

2. Principal Place of Business - No P.O. Box #

3. Mailing Address  
20283 State Rd 7

Suite, Apt. #, etc.

Suite, Apt. #, etc.  
Suite 300

City & State

City & State  
Boca Raton, FL

Zip

Country

Zip  
33498

Country

USA

6. Name and Address of Current Registered Agent

GERSTIN, JOSHUA G ESQ.  
1499 W PALMETTO PK RD, # 412  
BOCA RATON, FL 33486

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$61.25  
Due by May 1, 2007

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

Make check payable to  
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete  
NAME WOLFE, STEPHEN  
STREET ADDRESS 9560 FOXTROT LANE  
CITY-ST-ZIP BOCA RATON, FL 33496

TITLE VPD ☐ Delete  
NAME MILLER, BARRY  
STREET ADDRESS 9467 BARIRONE CT  
CITY-ST-ZIP BOCA RATON, FL 33496

TITLE TD ☐ Delete  
NAME NABAL, KEN  
STREET ADDRESS 9547 FOX TROT LANE  
CITY-ST-ZIP BOCA RATON, FL 33496

TITLE SD ☐ Delete  
NAME DEROBERTIS, SAL  
STREET ADDRESS 9500 FOX TROT LN  
CITY-ST-ZIP BOCA RATON, FL 33496

TITLE D ☒ Delete  
NAME JANSEN, ED  
STREET ADDRESS 9548 FOX TROT LN  
CITY-ST-ZIP BOCA RATON, FL 33496

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition  
NAME Andrew Marcus  
STREET ADDRESS 15044 Rhumba Way  
CITY-ST-ZIP Boca Raton, FL 33496

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/20/07

Date

384-482-9476

Daytime Phone #