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NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Feb 24, 1999 8:00 am  
Secretary of State

02-24-1999 90096 034 \*\*\*\*61.25

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1. Corporation Name

INDIAN RIVER YOUTH SYMPHONY, INC.

Principal Place of Business

940 48TH AVE  
VERO BEACH FL 32966  
US

Mailing Address

P.O. BOX 7194  
VERO BEACH FL 32961



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

3. Date Incorporated or Qualified

12/12/1996

4. FEI Number

65-0717701

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

Trust Fund Contribution

\$5.00 May Be  
Added to Fees

9. Name and Address of Current Registered Agent

FRITZ, TOM  
940 48TH AVE  
VERO BEACH FL 32962

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
D	LABRANCHE, KEL	12736 NORTH A1A	VERO BEACH FL 32963	
D	SCHMIDT, TED	P.O. BOX 7194 N/A	VERO BEACH FL 32961	X
D	FRITZ, TOM	940 48TH AVE	VERO BEACH FL 32962	
D	BODE, SUZIE	236 18TH AVE	VERO BEACH FL 32962	
D	SHOEMAKER, JACKIE	P.O. BOX 277 N/A	VERO BEACH FL 32961	X

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP	Change	Addition
D	SCHMIDT, TED	P.O. BOX 7194	VERO BEACH, FL 32961	X	
D	SHOEMAKER, JACKIE	P.O. BOX 277	VERO BEACH, FL 32961	X	

14. 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 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 as an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

Date

Daytime Phone #

CR2E037 (1/98)