FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 MAR -8 AM 8:56

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 717064 (0)

1. Corporation Name

NORTHWEST FLORIDA BALLET, INC.

Principal Place of Business	Mailing Address
POST OFFICE BOX 964 101 CHICAGO AVE. FORT WALTON BEACH FL 32549	POST OFFICE BOX 964 101 CHICAGO AVE. FORT WALTON BEACH FL 32549

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 08/28/1969
3a. Date of Last Report: 05/01/1994
4. FEI Number: 59-1709205 ☐ 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
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ **$68.75** Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

CLEMENTS, MRS V G.
310 SUDDUTH CIRCLE
FORT WALTON BEACH FL 32548

10. Name and Address of New Registered Agent

01 Name
02 Street Address (P.O. Box Number is Not Acceptable)
03 100001426001 03/10/95--01024--009 ****130.00
04 City 05 FL Zip Code ****130.00

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	P,D ☒ Change ☐ Addition
NAME	EUBANKS, PENNY	1.2 NAME	Bowles, Sherry
STREET ADDRESS	420 SULLIVAN ST.	1.3 STREET ADDRESS	313 Okaloosa Rd.
CITY-ST-ZIP	FT. WALTON BEACH FL	1.4 CITY-ST-ZIP	Ft. Walton Bch, FL 32548
TITLE	P	2.1 TITLE	P,D ☒ Change ☒ Addition
NAME	LUKES, VALARIE	2.2 NAME	Davila, Lynda
STREET ADDRESS	220 ANGLER DRIVE #1	2.3 STREET ADDRESS	202 Azalea Ct.
CITY-ST-ZIP	FT. WALTON BEACH FL	2.4 CITY-ST-ZIP	Destin, FL 32541
TITLE	S	3.1 TITLE	☐ Change ☐ Addition
NAME	COLLINS, MARY	3.2 NAME	
STREET ADDRESS	713 BRADFORD PL	3.3 STREET ADDRESS	
CITY-ST-ZIP	FT WALTON BCH FL	3.4 CITY-ST-ZIP	
TITLE	T	4.1 TITLE	T,D ☒ Change ☐ Addition
NAME	DAVILA, LYNDA	4.2 NAME	Thompson, Gloria
STREET ADDRESS	202 AZALEA CT.	4.3 STREET ADDRESS	257 Ewing Ct.
CITY-ST-ZIP	DESTIN FL	4.4 CITY-ST-ZIP	Ft. Walton Bch, FL 32548
TITLE	D	5.1 TITLE	☐ Change ☐ Addition
NAME	CLEMENTS, BERNADETTE	5.2 NAME	
STREET ADDRESS	310 SUDDUTH CRCL.	5.3 STREET ADDRESS	
CITY-ST-ZIP	FT.WALTON BCH. FL	5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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 on an attachment with an address.

SIGNATURE: Bernadette Clements 1/16/95 (904) 664-7787
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0071006