

2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED
Oct 07, 2008
Secretary of State**

DOCUMENT# N04000001181

Entity Name: SPACE COAST BALLET COMPANY

Current Principal Place of Business:2774 N. HARBOR CITY BLVD
MELBOURNE, FL 32935**New Principal Place of Business:**296 NORTH WICKHAM ROAD
MELBOURNE, FL 32935**Current Mailing Address:**2774 N. HARBOR CITY BLVD
MELBOURNE, FL 32935**New Mailing Address:**296 NORTH WICKHAM ROAD
MELBOURNE, FL 32935

FEI Number: 20-0718478

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:TERRI, KIZZORT
2760 FELLWOOD LANE
WEST MELBOURNE, FL 32904 US**Name and Address of New Registered Agent:**ANGELA, PILKINGTON
3775 BIG PINE ROAD
MELBOURNE, FL 32934 US

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.

SIGNATURE: ANGELA PILKINGTON

10/07/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:Title: D () Delete
Name: CHEPELEV, BORIS DIR
Address: 523 DEERFIELD DRIVE
City-St-Zip: MELBOURNE, FL 32940Title: D () Delete
Name: KIROVA, JANNA
Address: 523 DEERFIELD DRIVE
City-St-Zip: MELBOURNE, FL 32940Title: D (X) Delete
Name: KIZZORT, TERRI
Address: 2760 FELLWOOD LANE
City-St-Zip: WEST MELBOURNE, FL 32904Title: D () Delete
Name: WEISS, BRUCE
Address: 5275 SORREL DR.
City-St-Zip: MELBOURNE, FL 32934Title: D (X) Delete
Name: DOUGHERTY, LISA
Address: 331 ORLANDO BOULEVARD
City-St-Zip: INDIALANTIC, FL 32903Title: D () Delete
Name: HARBACH, PAT
Address: 2318 COUNTRY CLUB ROAD
City-St-Zip: MELBOURNE, FL 32901**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: () Change () Addition
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Name:
Address:
City-St-Zip:Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANGELA PILKINGTON

TREA

10/07/2008

Electronic Signature of Signing Officer or Director

Date