

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

**FILED  
Apr 18, 2007  
Secretary of State**

DOCUMENT# N06000003404

**Entity Name:** THE LEADERSHIP & MUSIC CONSERVATORY OF PINELLAS COUNTY, INC.

**Current Principal Place of Business:**

344 CASCADE LANE  
PALM HARBOR, FL 34684

**New Principal Place of Business:**

**Current Mailing Address:**

344 CASCADE LANE  
PALM HARBOR, FL 34684

**New Mailing Address:**

FEI Number: 20-4604600      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

HOCHBERG, JEFF  
344 CASCADE LANE  
PALM HARBOR, FL 34684      US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: PD      ( ) Delete  
Name: HOCHBERG, JEFF  
Address: 344 CASCADE LANE  
City-St-Zip: PALM HARBOR, FL 34684

Title: SD      ( ) Delete  
Name: DEARMAS, DEBBIE  
Address: 344 CASCADE LANE  
City-St-Zip: PALM HARBOR, FL 34684

Title: D      ( ) Delete  
Name: NETTLER, MIKE  
Address: 1043 HUNTERS PLACE  
City-St-Zip: OLDSMAR, FL 34677

Title: D      ( ) Delete  
Name: FORD, KEVIN  
Address: 416 VENTURA DR.  
City-St-Zip: OLDSMAR, FL 34677

**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  
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 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: JEFF HOCHBERG

D

04/18/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date