

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N31605

FILED
Mar 10, 2005
Secretary of State

Entity Name: SARASOTA BALLET OF FLORIDA, INC.

Current Principal Place of Business:

5555 N. TAMIAMI TRAIL
SARASOTA, FL 34243 US

New Principal Place of Business:

Current Mailing Address:

5555 N. TAMIAMI TRAIL
SARASOTA, FL 34243 US

New Mailing Address:

FEI Number: 65-0135900

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DE WARREN, ROBERT
5555 N. TAMIAMI TRAIL
SARASOTA, FL 34243 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: DP () Delete
Name: KNOWLES, CHARLES
Address: 4034 ROBERTS POINT ROAD
City-St-Zip: SARASOTA, FL 34242

Title: DVP () Delete
Name: KANE, DANIEL
Address: 614 OWL DRIVE SOUTH
City-St-Zip: SARASOTA, FL 34236

Title: DVP () Delete
Name: CHIP, JEROLD
Address: 223 TREMONT LANE
City-St-Zip: SARASOTA, FL 34235

Title: DT () Delete
Name: CLARKE, ROBERT P
Address: 1858 RINGLING BOULEVARD
City-St-Zip: SARASOTA, FL 34236

Title: DVP () Delete
Name: GITHLER, CHARLES
Address: 1258 NORTH PALM AVENUE
City-St-Zip: SARASOTA, FL 34236

Title: DS () Delete
Name: MUIR, DIANE L
Address: BAY ISLES ROAD
City-St-Zip: LONGBOAT KEY, FL 34228

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: CHIP, JEROLD N.M.D.
Address: 7563 ALBERT TILLINGHAUST DRIVE
City-St-Zip: SARASOTA, FL 34240

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DVP (X) Change () Addition
Name: ANGELOTTI, RICHARD
Address: 228 SEAGULL LANE
City-St-Zip: SARASOTA, FL 34236

Title: DT (X) Change () Addition
Name: MYERS, C W
Address: 4732 PINE HARRIER DRIVE
City-St-Zip: SARASOTA, FL 34231

Title: DVP (X) Change () Addition
Name: GOLDSTEIN, SYDNEY
Address: 35 WATERGATE DRIVE, APT. 1504
City-St-Zip: SARASOTA, FL 34236

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 Section 119.07(3)(i), 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: DIANE L. MUIR

DS

03/10/2005

Electronic Signature of Signing Officer or Director

Date