2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000000921

FILED Jan 16, 2008 Secretary of State

Entity Name: MAYA PLISETSKAYA AND RODION SHCHEDRIN INTERNATIONAL FOUNDATION, INC.

Current Principal Place of Business: New Principal Place of Business: 500 CANAL STREET NEW SMYRNA BEACH, FL 32168 **Current Mailing Address: New Mailing Address:** 500 CANAL STREET NEW SMYRNA BEACH, FL 32168 FEI Number: 59-3498066 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BREWER, MICHAEL L 500 CANAL STREET NEW SMYRNA BEACH, FL 32168 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: DP () Delete () Change () Addition PLISETSKAYA, MAYA Name: Name: THERESIEN STR. 23 Address: Address: City-St-Zip: MUNICH GERMANY, 80333 City-St-Zip: Title: () Delete Title: () Change () Addition SHCHEDRIN, RODION Name: Name: Address: THERESIEN STR. 23 Address: City-St-Zip: MUNICH GERMANY, 80333 City-St-Zip: Title: DST () Delete Title: () Change () Addition BREWER, MICHAEL L Name: Name: Address: 500 CANAL STREET Address: City-St-Zip: NEW SMYRNA BEACH, FL 32168 City-St-Zip: Title: Title: () Change () Addition () Delete Name: TCHELISTCHEFF, VICTOR Name: 384 DESOTO DRIVE Address: Address: City-St-Zip: NEW SMYRNA BEACH, FL 32168 City-St-Zip: Title: () Delete Title: () Change () Addition FETSCHER, SUZANNE Name: Name: 400 N. CHURCH ST, APT 214 Address: Address: City-St-Zip: CHARLOTTEE, NC 28202 City-St-Zip: Title: () Delete Title: () Change () Addition NIELS, ELGER Name: Name: Address: HO FLAAN 215 Address: LEIDEN, NETHERLANDS, NL232- SR City-St-Zip: 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: MICHAEL L. BREWER SEC 01/16/2008