2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 04, 2009
Secretary of State

DOCUMENT# N98000000921

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

Current Principal Place of Business:

500 CANAL STREET
NEW SMYRNA BEACH, FL 32168

New Principal Place of Business:

Current Mailing Address:

500 CANAL STREET
NEW SMYRNA BEACH, FL 32168

New Mailing Address:

FEI Number: 59-3498066 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BREWER, MICHAEL L
500 CANAL STREET
NEW SMYRNA BEACH, FL 32168 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: PLISETSKAYA, MAYA
Address: THERESIEN STR. 23
City-St-Zip: MUNICH GERMANY, 80333

Title: D ( ) Delete
Name: SHCHEDRIN, RODION
Address: THERESIEN STR. 23
City-St-Zip: MUNICH GERMANY, 80333

Title: DST ( ) Delete
Name: BREWER, MICHAEL L
Address: 500 CANAL STREET
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: D ( ) Delete
Name: TCHELISTCHEFF, VICTOR
Address: 384 DESOTO DRIVE
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: D ( ) Delete
Name: FETSCHER, SUZANNE
Address: 400 N. CHURCH ST, APT 214
City-St-Zip: CHARLOTTEE, NC 28202

Title: D ( ) Delete
Name: NIELS, ELGER
Address: HO FLAAN 215
City-St-Zip: LEIDEN, NETHERLANDS, NL232- SR

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:

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 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 02/04/2009

Electronic Signature of Signing Officer or Director — Date