

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N41170

Entity Name: BOCA BALLET THEATRE COMPANY**Current Principal Place of Business:**7630 NW 6TH AVENUE
BOCA RATON, FL 33487**Current Mailing Address:**7630 NW 6TH AVENUE
BOCA RATON, FL 33487 US**FEI Number:** 65-0238234**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GUIN, DAN
7630 N.W. 6TH AVE
BOCA RATON, FL 33487 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

Officer/Director Detail :

Title P
Name KENNEY, CHAD
Address 641 EAST WOOLBRIGHT #D105
City-State-Zip: BOYNTON BEACH FL 33435

Title D
Name GUIN, DAN
Address 7630 NW 6TH AVE
City-State-Zip: BOCA RATON FL 33487

Title T
Name UDINE, LAURIE
Address 2644 DEVON COURT
City-State-Zip: DELRAY BEACH FL 33445

Title D
Name DAVENPORT, KATHLEEN L M.D.
Address 7593 BOYNTON BEACH BLVD.
#280
City-State-Zip: BOYNTON BEACH FL 33437

Title VP
Name KNUCKOLLS-ROGER, KATHERINE
Address 8423 DEL PRADO DRIVE
City-State-Zip: DELRAY BEACH FL 33446

Title S
Name BOLTZ, VANESSA
Address 2209 NW 23RD WAY
City-State-Zip: BOCA RATON FL 33431

Title DIRECTOR
Name HAMMOND, DAVID
Address 6231 VIA VENETIA
City-State-Zip: DELRAY BEACH FL 33484

I hereby 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 all other like empowered.

SIGNATURE: DAN GUIN**REGISTERED AGENT****01/17/2017**

Electronic Signature of Signing Officer/Director Detail

Date