

2015 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	MARMOR, SETH
Address	10781 MAPLE CHASE DR
City-State-Zip:	BOCA RATON FL 33498

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

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

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

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

Title	S
Name	HENDERSON, ANNE
Address	2994 NEEDHAM CT
City-State-Zip:	DELRAY BEACH FL 33445

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**EXECUTIVE DIRECTOR****02/23/2015**_____
Electronic Signature of Signing Officer/Director Detail_____
Date