

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jul 21, 2004
Secretary of State**

DOCUMENT# 723675

Entity Name: BALLET GUILD OF SANFORD-SEMINOLE, INC.

Current Principal Place of Business:

2560 ELM AVENUE
P.O. BOX 1381
SANFORD, FL 32772

New Principal Place of Business:

Current Mailing Address:

2560 ELM AVENUE
P.O. BOX 1381
SANFORD, FL 32772

New Mailing Address:

P.O. BOX 1381
SANFORD, FL 32772

FEI Number: 23-7198893 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GLADMAN, SUSAN S
101 W CRYSTAL DR
SANFORD, FL 32773 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: S () Delete
Name: SAWCZUK, SALLY A
Address: 129 GARRISON DR.
City-St-Zip: SANFORD, FL

Title: TVP () Delete
Name: ANDERSON, BARBARA
Address: 1402 TOLSON RD.
City-St-Zip: DELAND, FL 32720

Title: P () Delete
Name: GLADMAN, SUSAN
Address: 101 W CRYSTAL DR
City-St-Zip: SANFORD, FL 32773

Title: D () Delete
Name: MCLAMB, ROBIN
Address: 4500 HALLELUJAH WAY
City-St-Zip: SANFORD, FL 32773

Title: D () Delete
Name: DREW, SHEILA
Address: 2560 ELM AVE
City-St-Zip: SANFORD, FL 32771

Title: D () Delete
Name: ANDERSON, LEONARD
Address: 793 CREEKWATER TR APT 113
City-St-Zip: LAKE MARY, FL 32746

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: D (X) Change () Addition
Name: DANTUMA, MARY
Address: 8437 RIVER BRANCH PLACE
City-St-Zip: SANFORD, FL 32773

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: SUSAN S. GLADMAN

P

07/21/2004

Electronic Signature of Signing Officer or Director

Date