

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 724719

FILED  
Apr 28, 2005  
Secretary of State

Entity Name: THE TALLAHASSEE BALLET, INC.

## Current Principal Place of Business:

218 E. THIRD AVE.  
TALLAHASSEE, FL 32303 US

## New Principal Place of Business:

## Current Mailing Address:

P. O. BOX 772  
TALLAHASSEE, FL 32302 US

## New Mailing Address:

FEI Number: 23-7273533      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ASHBURN, LAUREN  
1610 BELLE VUE WAY  
TALLAHASSEE, FL 32304 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: VD ( ) Delete  
Name: OLIVE HAND, MARTHA  
Address: 272 RUSCHELL DR N  
City-St-Zip: TALLAHASSEE, FL 32312

Title: TD ( ) Delete  
Name: SALTERS, AGATHA M  
Address: 1845 COPPER AXE TR  
City-St-Zip: TALLAHASSEE, FL 32308

Title: SD ( ) Delete  
Name: HERRING, JOLINDA  
Address: 2141 TED HINES DR  
City-St-Zip: TALLAHASSEE, FL 32308

Title: M ( ) Delete  
Name: ASHBURN, LAUREN  
Address: 1610 BELLE VUE WAY  
City-St-Zip: TALLAHASSEE, FL 32304

Title: PD ( ) Delete  
Name: KIRKLAND, BETH  
Address: 2961 GOLDEN EAGLE DR  
City-St-Zip: TALLAHASSEE, FL 32312

Title: D ( ) Delete  
Name: DICK, KAY  
Address: 233 CLARE DRIVE  
City-St-Zip: TALLAHASSEE, FL 32308

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VD (X) Change ( ) Addition  
Name: SALTERS, AGATHA M  
Address: 1845 COPPER AXE TR  
City-St-Zip: TALLAHASSEE, FL 32308

Title: TD (X) Change ( ) Addition  
Name: PUCKETT, JULI  
Address: 2100 TALLAVANA TRAIL  
City-St-Zip: HAVANA, FL 32333

Title: SD (X) Change ( ) Addition  
Name: JANSEN, STEPHANIE  
Address: 1020 SUMMERBROOKE DRIVE  
City-St-Zip: TALLAHASSEE, FL 32312

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: PD (X) Change ( ) Addition  
Name: OLIVE HALL, MARTHA  
Address: 272 ROSEHILL DR N  
City-St-Zip: TALLAHASSEE, FL 32312

Title: D (X) Change ( ) Addition  
Name: KIRKLAND, BETH  
Address: 2961 GOLDEN EAGLE DRIVE  
City-St-Zip: TALLAHASSEE, FL 32312

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: MARTHA OLIVE-HALL

PD

04/28/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date