2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#724719

FILED Jan 14, 2009 Secretary of State

Entity Name: THE TALLAHASSEE BALLET, INC.

Current Principal Place of Business:

218 E. THIRD AVE.
TALLAHASSEE, FL 32303 US

Current Mailing Address: New Mailing Address:

P. O. BOX 772 TALLAHASSEE, FL 32302 US

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

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

PICHARD, JANET MS. 218 E. 3RD AVENUE TALLAHASSEE, FL 32303 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:

Clastica di Cinnatura et Deviatore d'Arent

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 A
 () Delete
 Title:
 A
 (X) Change () Addition

 Name:
 SALTERS, AGATHA M
 Name:
 CURVA, FELY

 Address:
 1845 COPPER AXE TR
 Address:
 1212 PIEDMONT DRIVE

 City-St-Zip:
 TALLAHASSEE, FL 32308
 City-St-Zip:
 TALLAHASSEE, FL 32312

Title: B () Delete Title: B (X) Change () Addition

 Name:
 CURVA, FELY
 Name:
 CLICK, NANCY

 Address:
 1212 PIEDMONT DRIVE
 Address:
 3242 ADDISON LANE

 City-St-Zip:
 TALLAHASSEE, FL 32312
 City-St-Zip:
 TALLAHASSEE, FL 32317

Title: () Delete Title: (X) Change () Addition MCKINNEY-WILLIAMS, OPAL JANSEN, STEPHANIE Name: Name: 1201 STONEY CREEK WAY Address: 4418 HIGHGROVE PLACE Address: City-St-Zip: TALLAHASSEE, FL 32309 City-St-Zip: TALLAHASSEE, FL 32317

Title: D () Delete Title: () Change () Addition

 Name:
 PICHARD, JANET
 Name:

 Address:
 218 E. 3RD AVENUE
 Address:

 City-St-Zip:
 TALLAHASSEE, FL 32303
 City-St-Zip:

Title: () Delete Title: (X) Change () Addition OLIVE-HALL, MARTHA MUSE-SALTERS, AGATHA M Name: Name: 272 ROSEHILL DR N 1845 COPPER AXE TR Address: Address: City-St-Zip: TALLAHASSEE, FL 32312 City-St-Zip: TALLAHASSEE, FL 32308

Title: F () Delete Title: () Change () Addition

 Name:
 TALIAFERRO, LEN
 Name:

 Address:
 P.O. BOX 2214
 Address:

 City-St-Zip:
 TALLAHASSEE, FL 32306 22
 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: JANET PICHARD MS. 01/14/2009

Electronic Signature of Signing Officer or Director

Date