2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 729769

Entity Name: BALLET FLORIDA, INC.

Apr 27, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

500 FERN STREET

WEST PALM BEACH, FL 33401

Current Mailing Address: New Mailing Address:

500 FERN STREET

WEST PALM BEACH, FL 33401

FEI Number: 23-7384346 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:

BUCHECK, JOSEPH J. JR. 2555 CANTERBURY DRIVE SOUTH W PALM BCH., FL 33407

OFFICERS AND DIRECTORS:

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:

Title:

Electronic Signature of Registered Agent Date

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition

DRAINNE, MAX DRAINNE, MAX Name: Name: ONE GOLFVIEW DR. Address: ONE GOLFVIEW DR. Address: City-St-Zip: PALM BEACH, FL 33480 City-St-Zip: PALM BEACH, FL 33480

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

HART, NANCY Name: Name: Address: 7114 EAGLE TERR Address: City-St-Zip: WEST PALM BEACH, FL 33412 City-St-Zip:

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

VESELSKY, J. DAVID JR VESELSKY, J. DAVID JR Name: Name: 177 CLAREDON AVE Address: Address: 595 NORTH LAKE WAY City-St-Zip: PALM BEACH, FL 33480 City-St-Zip: PALM BEACH, FL 33480

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

HALE, MARIE. Name: Name: Address: 5200 N DIXIE 1501 Address: City-St-Zip: W. PALM BEACH, FL City-St-Zip:

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

ESCALANTE, JUAN J Name: Name: CACELLA, LEAH M 160 NW 143RD ST 255 EVERNA STREET Address: Address:

City-St-Zip: MIAMI, FL 33168 City-St-Zip: WEST PALM BEACH, FL 33401

() Delete (X) Change () Addition TELESCO, SUSAN TELESCO, SUSAN Name: Name: Address: 150 VIA BELLARIA Address: 150 VIA BELLARIA PALM BEACH, FL 33480 PALM BEACH, FL 33480 City-St-Zip: 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.

Title:

SIGNATURE: LEAH M. CACELLA Μ 04/27/2005