

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000051772

FILED
Jan 18, 2005
Secretary of State

Entity Name: NATIONAL THEATER FOR ARTS & EDUCATION LLC

Current Principal Place of Business:

1201 GEORGE BUSH BLVD.
DELRAY BEACH, FL 334837203

New Principal Place of Business:

17189 ROYAL COVE WAY
BOCA RATON, FL 33496

Current Mailing Address:

1201 GEORGE BUSH BLVD.
DELRAY BEACH, FL 334837203

New Mailing Address:

FEI Number: 20-1417535 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

BALLERANO, JAMES A JR.
1201 GEORGE BUSH BLVD.
DELRAY BEACH, FL 334837203 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

MANAGING MEMBERS/MEMBERS:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR () Change (X) Addition
Name: RAPAPORT, JOYCE
Address: 17189 ROYAL COVE WAY
City-St-Zip: BOCA RATON, FL 33496

Title: MGR () Change (X) Addition
Name: RAPAPORT, KEITH
Address: 17189 ROYAL COVE WAY
City-St-Zip: BOCA RATON, FL 33496

Title: MGR () Change (X) Addition
Name: RAPAPORT, STEPHEN
Address: 17189 ROYAL COVE WAY
City-St-Zip: BOCA RATON, FL 33496

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JOYCE RAPAPORT

MGR

01/18/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date