

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000004105

FILED
May 14, 2005
Secretary of State

Entity Name: YOUTH OPERA APPRECIATION INC.

Current Principal Place of Business:

2727 11TH CT.
PALM HARBOR, FL 34684

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 634
PALM HARBOR, FL 34682 US

New Mailing Address:

FEI Number: 01-0717749 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED
1203 GOVERNORS SQUARE BLVD
SUITE 101
TALLAHASSEE, FL 323012960 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: DRT () Delete
Name: COULMAS, JULIA D PRES.
Address: 2727 11TH CT
City-St-Zip: PALM HARBOR, FL 34684

Title: DRT () Delete
Name: LAURENTI, MARIO V.P.
Address: 1524 S. HIGHLAND AVE.
City-St-Zip: CLEARWATER, FL 33756

Title: DRT () Delete
Name: PEEPLES, SARA SEC
Address: 14177 JOEL CT.
City-St-Zip: LARGO, FL 33774

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DRT (X) Change () Addition
Name: LAURENTI, MARIO V.P.
Address: 7205 64TH WAY N.
City-St-Zip: PINELLAS PARK, FL 33781

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: JULIA COULMAS

_____ Electronic Signature of Signing Officer or Director

DRT

05/14/2005

_____ Date