2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000007378

Entity Name: WEST COAST CIVIC BALLET, INC.

FILED Apr 08, 2009 Secretary of State

Current Principa	al Place of Business:	New Principal Place of Business:

3303 BAHIA VISTA STREET SARASOTA, FL 34239

Current Mailing Address: New Mailing Address:

3303 BAHIA VISTA STREET SARASOTA, FL 34239 US

OFFICERS AND DIRECTORS:

FEI Number: 16-1634368 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:

HOBERMAN, CLIFFORD E HOBERMAN, CLIFFORD E 5510 BENTGRASS DRIVE 5459 BENTGRASS DRIVE 104 SARASOTA, FL 34235 US SARASOTA, FL 34235 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:

04/08/2009

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

HOBERMAN, CLIFFORD E

SARASOTA, FL 34235

5459 BENTGRASS DRIVE, #117

(X) Change () Addition

Date

() Delete HOBERMAN, CLIFFORD E Name: Name: 5510 BENTGRASS DRIVE, #104 Address: Address: City-St-Zip:

City-St-Zip: SARASOTA, FL 34235

Title: () Delete Title:

(X) Change () Addition HOBERMAN, CLIFFORD E ACTING Name: MICHELS, CAROLL Name: Address: 5510 BENTGRASS DRIVE, #104 Address: 1724 BURGOS DRIVE

City-St-Zip: SARASOTA, FL 34235 City-St-Zip: SARASOTA, FL 34238

Title: VP/D () Delete Title: (X) Change () Addition

MICHELS, CAROLL OVERDORF, REBECCA Name: Name: 1724 BURGOS DRIVE 5563 BRIARCLIFF DRIVE Address: Address: City-St-Zip: SARASOTA, FL 34238 City-St-Zip: SARASOTA, FL 34232

() Delete Title: S/D Title: FD (X) Change () Addition

OVERDORF, REBECCA Name: Name: VINTON, DEBORAH 5563 BRIARCLIFF DRIVE Address: Address: 2251 HICKORY AV City-St-Zip: SARASOTA, FL 34232 City-St-Zip: SARASOTA, FL 34238

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

ADAMEC, DONALD Name: Name: 3235 PINE VALLEY DRIVE Address: Address: City-St-Zip: SARASOTA, FL 34239 City-St-Zip:

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

JIMENEZ, JANELLE Name: Name: Address: Address: 5353 STARWOOD PL SARASOTA, FL 34232 City-St-Zip: 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: CLIFFORD E HOBERMAN **PRES** 04/08/2009

Electronic Signature of Signing Officer or Director

Date