2006 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

May 10, 2006 8:00 am Secretary of State **DOCUMENT # N02000007663** 1. Entity Name 05-10-2006 90092 036 ****61.25 THE BACH ENSEMBLE, INCORPORATED Principal Place of Business Mailing Address 3667 ARCTIC CIRCLE NAPLES FL 34112 3667 ARCTIC CIRCLE NAPLES FL 34112 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/05) City & State Applied For City & State 4. FEI Number 51-0429031 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name SILVESTRI, VITO N Street Address (P.O. Box Number is Not Acceptable) 3667 ARCTIC CIRCLE NAPLES FL 34112 Zip Code City 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 Make Check Payable to 9. Election Campaign Financing **\$5.00** May Be Due By May 1, 2006 Trust Fund Contribution. Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. PD ☐ Delete TITLE Change Addition TITLE SILVESTRI, VITO N NAME NAME Diana Dearth STREET ADDRESS STREET ADDRESS 3667 ARTIC CIRCLE 156 Sabal Lake Drive NAPLES FL 34112 CITY-ST-ZIP CITY-ST-ZIP Naples, FL 34104 ☐ Delete TITLE ☐ Change Addition A DOIRON, RONALD NAME NAME Dr. Helga Drews 3461 ANGUILLA WAY STREET ADDRESS STREET ADDRESS 7061 Verde Way NAPLES FL 34110 CITY-ST-ZIP CITY-ST-ZIP Naples, FL 34109 Addition TITLE ☐ Delete TITLE BROMMEL, BERNARD J NAME NAME Addition STREET ADDRESS 3440 N. LAKE SHORE DR., #90 STREET ADDRESS Janet Ortenzo CHICAGO IL 60657 CITY-ST-ZIP CITY-ST-ZIP 13606 Cherry Tree Court Change TITLE ☐ Delete GOODMAN, GINNY NAME Ft. Myers, FL 33912 STREET ADDRESS 3604 EXUMA WAY STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP NAPLES FL 34119 ☐ Change ☐ Addition TITLE TITLE ☐ Delete PEARCE, STEPHANIE MARKE 3281 GOLDEN GATE BLVD. STREET ADDRESS STREET ADDRESS -end-NAPLES FL 34120 CITY-ST-ZIP CITY-ST-7IP ☐ Change Addition Delete TITLE SILVESTRI, MARC NAME NAME 192 80TH AVE., APT. 1C STREET ADDRESS STREET ADDRESS NEW YORK NY 10011-1604 CITY-ST-ZIP CITY-ST-ZIP

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. May (700 6 (239) 417-2141 SIGNATURE: