

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 08, 2006 08:00 AM
Secretary of State

DOCUMENT # N02000009420

1. Entity Name
THE NEW SCHOOL OF CLASSICAL CERAMICS, INC.



Principal Place of Business
12605 RIVERBIRCH DR.
RIVERVIEW, FL 33569

Mailing Address
P.O. BOX 67
RIVERVIEW, FL 33568-0067



04252006 No Chg-NP CR2E037 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
05-0543454

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

JOHNSON, PATRICIA L
12605 RIVERBIRCH DRIVE
RIVERVIEW, FL 33569

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IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE DP
NAME FOTOPULOS, SARA M
STREET ADDRESS P.O. BOX 67
CITY-ST-ZIP RIVERVIEW, FL 335680067

TITLE D
NAME SANTORINEOS, KATE
STREET ADDRESS 16923 NORWOOD ROAD
CITY-ST-ZIP SANDY SPRING, MD 20860

TITLE D
NAME FELLIOS, MARIA
STREET ADDRESS 120 DEVON DRIVE
CITY-ST-ZIP CLEARWATER BEACH, FL 33767

TITLE DS
NAME JOHNSON, PATRICIA L
STREET ADDRESS 12605 RIVERBIRCH DRIVE
CITY-ST-ZIP RIVERVIEW, FL 33569

TITLE D
NAME FELLIOS, ANDREW
STREET ADDRESS 120 DEVON DRIVE
CITY-ST-ZIP CLEARWATER BEACH, FL 33767

TITLE D
NAME MANSUR, VICKI
STREET ADDRESS 4195 SPARROW HAWK RD
CITY-ST-ZIP MELBOURNE, FL 32934

U00000564308
05/20/06-80058-007 61.25

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

SIGNATURE: Patricia L. Johnson Patricia L. Johnson 4.25.06 83.225.4247