


**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 25, 2007 08:00 A
Secretary of State

DOCUMENT # N02000009420 1. Entity Name THE NEW SCHOOL OF CLASSICAL CERAMICS, INC.	
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Principal Place of Business 12605 RIVERBIRCH DR. RIVERVIEW, FL 33569	Mailing Address P.O. BOX 67 RIVERVIEW, FL 33568-0067
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DO NOT WRITE IN THIS SPACE



04182007 No Chg-NP CR2E037 (4/06)

4. FEI Number 05-0543454	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$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, 2007	9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP FOTOPULOS, SARA M P.O. BOX 67 RIVERVIEW, FL 335680067
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SANTORINEOS, KATE 16923 NORWOOD ROAD SANDY SPRING, MD 20860
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FELLIOS, MARIA 120 DEVON DRIVE CLEARWATER BEACH, FL 33767
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS JOHNSON, PATRICIA L 12605 RIVERBIRCH DRIVE RIVERVIEW, FL 33569
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FELLIOS, ANDREW 120 DEVON DRIVE CLEARWATER BEACH, FL 33767
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MANSUR, VICKI 4195 SPARROW HAWK RD MELBOURNE, FL 32934

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05/08/07-80083-019 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** **4-19-2007** **225-4247**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #