2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000001645

FILED Jul 14, 2007 Secretary of State

Entity Name: THE ROYAL CELEBRATION BALLET INC.

Current Principal Place of Business:		New Principal Place of Business:		
5 RILEY	ROAD ATION, FL 34747			
,CLCDR/	(110N, FL 34/4/			
current Mailing Address:		New Mailing Addr	New Mailing Address:	
5 RILEY ELEBRA	ROAD ATION, FL 34747			
accordar	r: 27-0055094 FEI Number Applied For() FI nce with s. 607.193(2)(b), F.S., the corporation did not rec d Address of Current Registered Agent:		Certificate of Status Desired () s of New Registered Agent:	
020 MIZĖ	, AUBREY H JR. ELL AVENUE PARK, FL 32792 US			
	e named entity submits this statement for the purpo te of Florida.	ose of changing its registe	ered office or registered agent, or both,	
IGNATU	RE:			
	Electronic Signature of Registered Agent		Date	
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICERS AND DIRECTO		
ile: ame: Idress: ty-St-Zip:	D () Delete MENDONCA, KATHRYN 800 CELEBRATION AVENUE CELEBRATION, FL 34747 US	Title: Name: Address: City-St-Zip:	() Change () Addition	
tle: ame: ldress: ty-St-Zip:	D () Delete CRABTREE, VALLERI 930 SPRING PARK LOOP CELEBRATION, FL 34747 US	Title: Name: Address: City-St-Zip:	() Change () Addition	
tle: ame: ddress:	D () Delete DING, WEI CENTRAL DANCE COMPANY OF CHINA BEIJING, BG 20000 CH	Title: Name: Address: City-St-Zip:	() Change () Addition	
ty-St-Zip:	SD () Delete	Title:	() Change () Addition	
ty-St-Zip: tle: ame: ldress: ty-St-Zip:	KOZAK, JOAN 600 NADINA PLACE CELEBRATION, FL 34747 US	Name: Address: City-St-Zip:		
le: ime: dress:	KOZAK, JOAN 600 NADINA PLACE	Address:	()Change()Addition	

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: MICHELE RUDAR MISS 07/14/2007