

N11000005851

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

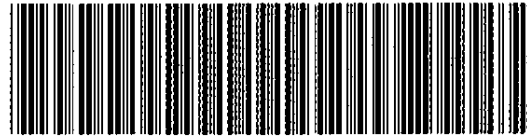
(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: Tampa Ballet Theatre, Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an original and one (1) copy of the Articles of Incorporation and a check for :

\$70.00
Filing Fee

\$78.75
Filing Fee &
Certificate of
Status

\$78.75
Filing Fee
& Certified Copy

\$87.50
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: Lindsay Clark
Name (Printed or typed)

270 Ixora Drive
Address

Palm Harbor, FL 34684
City, State & Zip

(727)688-7670
Telephone number

Lindsay@tampabayballet.com
E-mail address: (to be used for future annual report notification)

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TALLAHASSEE, FLORIDA

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION
In compliance with Chapter 617, F.S., (Not for Profit)

ARTICLE I NAME Tampa Ballet Theatre, Inc.
The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address
3705 Tampa Rd.
Suite 3
Oldsmar, Fl 34677

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
The purpose of Tampa Ballet Theatre is to provide an educational platform for the art of ballet in the community through performance by professional dancers. As well as allowing local dancers to train along side and study with professional dancers in production shows.

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed:

Elected by a self perpetuating board

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Lindsay Clark (President)
Address: 270 Ixora Drive
Palm Harbor, Fl 34684

Name and Title: Heidi Strohl (Vice President)
Address: 13304 2nd Street East
Madeira Beach, Fl 33708

Name and Title: Scott Clark (Treasurer)
Address: 270 Ixora Drive
Palm harbor, Fl 34684

Name and Title: John Waters (Secretary)
Address: 13650 Fareham Rd.
Odessa, Fl 33556

Name and Title:
Address:

Name and Title:
Address:

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Carl T. Watkins, Inc.
Address: 5103 Memorial Highway
Tampa, Fl 33634

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Lindsay Clark
Address: 270 Ixora Drive
Palm Harbor, Fl 34684

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TALLAHASSEE, FLORIDA

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Carl T. Watkins
Required Signature of Registered Agent

5/21/11
Date

I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Lindsay Clark
Required Signature of Incorporator

5/16/2011
Date