2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N19134

FILED Mar 25, 2004 Secretary of State

Entity Name: THE BALLET SOCIETY FOR BALLET EDUCATION, INC.

New Principal Place of Business: Current Principal Place of Business: 559 MIRROR LAKE DR ST PETERSBURG, FL 33701 US **Current Mailing Address: New Mailing Address:** C/O LARRY W SNARGE MGAS C/O LARRY W SHARER 100 2ND AVE SOUTH #600 100 2ND AVE SOUTH #600 SAINT PETERSBURG, FL 33701 US SAINT PETERSBURG, FL 33701 US FEI Number: 59-2863592 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: KINKAID, JAMIE J 11397 HÁMLIN BLVD. LARGO, FL 33774 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. SIGNATURE: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete KINKAID, JAMIE Name: Name: 11397 HAMLIN BLVD Address: Address: City-St-Zip: LARGO, FL 33774 City-St-Zip: Title: Title: () Delete () Change () Addition FRANCES, CATO Name: Name: Address: 5700 GROVE ST S Address: City-St-Zip: ST. PETERSBURG, FL 33705 City-St-Zip: Title: PD() Delete Title: PD (X) Change () Addition BROWN, CAL BROWN, CAL Name: Name: Address: 111 STOND AV NE Address: 124 BAY PLAZA City-St-Zip: SAINT PETERSBURG, FL 33701 City-St-Zip: TREASURE ISLAND, FL 33706 (X) Change () Addition Title: TD () Delete Title: TD Name: SHARER, LARRY Name: SHARER, LARRY W 5729 LA POERTA DEL SOL 376 Address: Address: 5729 LA PUERTA DEL SOL 376 City-St-Zip: SAINT PETERSBURG, FL 33715 City-St-Zip: SAINT PETERSBURG, FL 33715 Title: VCD () Delete Title: (X) Change () Addition ESTHER, SCOTT ESTHER, SCOTT Name: Name: 432 RAFAEL BLVD 432 RAFAEL BLVD Address: Address: SAINT PETERSBURG, FL 337014 SAINT PETERSBURG, FL 33704 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: LARRY W SHARER TD 03/25/2004