

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N22227

**FILED**  
**Apr 06, 2010**  
**Secretary of State**

**Entity Name:** ACADEMY OF BALLET ARTS, INC.

**Current Principal Place of Business:**

2914 FIRST AVE N  
SAINT PETERSBURG, FL 33713

**New Principal Place of Business:**

**Current Mailing Address:**

2914 FIRST AVE N  
SAINT PETERSBURG, FL 33713

**New Mailing Address:**

**FEI Number:** 59-2926455

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

TURNER, WILLIAM W. III  
8339 ANGELA CT.  
ZEPHYRHILLS, FL 33541 US

**Name and Address of New Registered Agent:**

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:**

**Title:** C  
**Name:** TURNER, WILLIAM W. III  
**Address:** 8339 ANGELA CT.  
**City-St-Zip:** ZEPHYRHILLS, FL 33541

**Title:** TREA  
**Name:** BALOG, ANN V  
**Address:** 401 NORTH 57TH AVENUE  
**City-St-Zip:** PENSACOLA, FL 32506

**Title:** T  
**Name:** JACOBSEN, LESTER  
**Address:** 16787 WAYNE ROAD  
**City-St-Zip:** AQUONE, NC 28781

**Title:** S  
**Name:** POMERANTZEFF, SUZANNE B  
**Address:** 1135 PARK ST. N  
**City-St-Zip:** SAINT PETERSBURG, FL 33710

I hereby 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 all other like empowered.

**SIGNATURE:** WILLIAM W TURNER III

C

04/06/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date