2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000001138

Entity Name: ORLANDO CITY BALLET, INC.

FILED Juņ 02, 2<u>00</u>9 Secretary of State

421 N. BUMBY AVENUE 1525 S. ALAFAYA TRAIL 103

ORLANDO, FL 32803 US

ORLANDO, FL 32828 US

Current Mailing Address: New Mailing Address:

421 N. BUMBY AVENUE 1525 S. ALAFAYA TRAIL 103

ORLANDO, FL 32803

ORLANDO, FL 32828 US

FEI Number: 59-3173524 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

DEPLER, IRINA 623 LAKÉSCAPE COURT ORLANDO, FL 32728

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:

PRES (X) Change () Addition () Delete

PAYMER, MICHELE Name: PAYMER, MICHELE Name: 1525 S. ALAFAYA TRAIL, SUITE 106 Address:

421 N. BUMBY AVENUE Address: ORLANDO, FL 32803 ORLANDO, FL 32828 US

City-St-Zip: City-St-Zip:

Title: () Delete Title: () Change () Addition

FEDOTOV, VADIM Name: Name: Address: 623 LAKESCAPE COURT Address: City-St-Zip: ORLANDO, FL 32728 City-St-Zip:

Title: TREA () Delete Title: () Change () Addition

FEDOTOV, VADIM Name: Name: 623 LAKESCAPE COURT Address: Address: City-St-Zip: ORLANDO, FL 32728 City-St-Zip:

Title: SECR () Delete Title: SECR (X) Change () Addition Name: VALK, KIMBERLY Name: ANDERSON, NICOLE

5909 CHESWOOD COURT Address: Address: 1525 S. ALAFAYA TRAIL, SUITE 106

City-St-Zip: ORLANDO, FL 32817 City-St-Zip: ORLANDO, FL 32828

Title: () Delete Title: MEMB () Change (X) Addition

NGUYEN, VAN-TAM Name: Name:

1525. S. ALAFAYA TRAIL, SUITE 106 Address: Address:

City-St-Zip: City-St-Zip: ORLANDO, FL 32828

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 PAYMER **PRES** 06/02/2009