FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
95 MAY 16 AM 8:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N93000003448 (8)

1. Corporation Name
BALLET EDDY TOUSSAINT U.S.A., INC.

Principal Place of Business	Mailing Address
1517 STATE ST SARASOTA FL 34236	1517 STATE ST SARASOTA FL 34236

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 07/28/1993
3a. Date of Last Report: 08/05/1994
4. FEI Number: 65-0424568 ☐ Applied For ☐ Not Applicable
2. Principal Place of Business (21)
2a. Mailing Address (26)
Suite, Apt. #, etc. (22) (27)
City & State (23) (28)
Zip (24) Country (25) Zip (29) Country (30)
5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒ **$68.75** Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

SMITH, STEPHEN J
2470 RINGLING BLVD
SARASOTA FL 34237

10. Name and Address of New Registered Agent

81 Name: Sue Bassett-Klauber
82 Street Address (P.O. Box Number is Not Acceptable): 1620 Gulf of Mexico Dr.
83:
84 City: Longboat Key, 85 FL Zip Code: 34228

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Sue Bassett-Klauber 5/11/95
Signature, type(s) or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	CD	1.1 TITLE		☐ Change ☐ Addition
NAME	BASSETT-KLAUBER, SUE	1.2 NAME		
STREET ADDRESS	1620 GULF OF MEXICO DR	1.3 STREET ADDRESS		
CITY-ST-ZIP	SARASOTA FL	1.4 CITY-ST-ZIP		
TITLE	PD	2.1 TITLE	D	☒ Change ☐ Addition
NAME	SMITH, STEPHEN J.	2.2 NAME	Charles Jennings	
STREET ADDRESS	2470 RINGLING BLVD	2.3 STREET ADDRESS	435 L'Ambiance Dr. M-908	
CITY-ST-ZIP	SARASOTA FL	2.4 CITY-ST-ZIP	Longboat Key, Fl 34228	
TITLE	EVD	3.1 TITLE		☐ Change ☐ Addition
NAME	HUIE, MARTHA	3.2 NAME		
STREET ADDRESS	4423 WESTWOOD LN	3.3 STREET ADDRESS		
CITY-ST-ZIP	SARASOTA FL	3.4 CITY-ST-ZIP		
TITLE	VD	4.1 TITLE		☐ Change ☐ Addition
NAME	BLASIOLA, PATRICIA	4.2 NAME		
STREET ADDRESS	6285 MIDNIGHT PASS RD	4.3 STREET ADDRESS		
CITY-ST-ZIP	SARASOTA FL	4.4 CITY-ST-ZIP		
TITLE	TD	5.1 TITLE		☐ Change ☐ Addition
NAME	WOLVERTON, JO ANN	5.2 NAME		
STREET ADDRESS	6021 EMERAL HARBOR DR	5.3 STREET ADDRESS		
CITY-ST-ZIP	SARASOTA FL	5.4 CITY-ST-ZIP		
TITLE	SD	6.1 TITLE		☐ Change ☐ Addition
NAME	PANARELLI, JOSEPH	6.2 NAME		
STREET ADDRESS	11 SUNSET DR #305	6.3 STREET ADDRESS		
CITY-ST-ZIP	SARASOTA FL	6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Sue Bassett-Klauber April 25, 1995 383-6464 (813)
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0018413