## 2002 UNIFORM BUSINESS REPORT (UBR)

## Apr 02, 2002 8:00 am Secretary of State DOCUMENT # **N96000000884** 1. Entity Name JACKSONVILLE BALLET THEATRE, INC. 04-02-2002 90928 029 \*\*\*\*61.25 Principal Place of Business Mailing Address JACKSONVILLE BALLET THEATER PO BOX 47215 10351 ATLANTIC CIRCLE JACKSONVILLE FL 32247 JACKSONVILLE FL 32246-2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-3362783 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) DULCE, ANAYA 5516 KEYSTONE DR SOUTH JACKSONVILLE FL 32207 City Zip Code 8. 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing à, Make Check Payable to \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees **Department of State** 3.1 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE. ☐ Delete TITLE ☐ Addition NAME SNODGRASS, DR. SUSAN NAME STREET ADDRESS STREET ADDRESS 4591 GLEN KERNAN PKWY EAST CITY-ST-ZIP CITY-ST-ZIP JACKSONVILLE FL 32224 TITLE TD ☐ Delete SECRETARY ☐ Addition TITLE DEVISE BOYER 109 FORMOSA PL. NAME GONZALEZ, MARTA NAME STREET ADDRESS STREET ADDRESS 1802 PROVIDENCE HOLLOW POUTE VEDRA BOK. FL.32082 CITY-ST-ZIP CITY-ST-ZIP JACKSONVILLE FL 32223 TITLE ☐ Delete TITLE FYEC ☐ Addition AVAYA, DULCE NAME DIR NAME DULCE, ANAYA STREET ADDRESS STREET ADDRESS 5516 KEYSTONE DRIVE SOUTH CITY-ST-ZIP CITY-ST-ZIP JACKSONVILLE FL 32207 VPRESIDENT FAVORITE, FRED TITLE ☐ Delete TITLE ☐ Addition NAME NAME ZOLLER, PATRICIA 8018 HUNTER GROVE RD. STREET ADDRESS STREET ADDRESS 10113 WHIPPOORWILL LANE JACKSONVILLE, FL 32276 CITY-ST-ZIP CITY-ST-ZIP JACKSONVILLE FL 32256 TITLE GASKIN, PAULA ☐ Delete TITLE Addition NAME FAVORITE, FRED NAME 74 1/2 SANJUAN DR. STREET ADDRESS STREET ADDRESS 8018 HUNTERS GROVE RD CITY-ST-ZIP CITY-ST-ZIP PONTE VEDRA BEH, FL 320EZ JACKSONVILLE FL 32256 TITLE ☐ Delete TITLE ☐ Addition IEVAN, LEILA D NAME HART, ERIK NAME 3285 MARBON RD STREET ADDRESS 128 EAST FORSYTHE STREET ADDRESS JAEKSONVINE, Fl. 32223 CITY-ST-ZIP CITY-ST-ZIP JACKSONVILLE FL 32202

12. I hereby certify that the information supplied with this filing does not qualify 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: