## FILE NOW: FILING FEE IS \$61.25

Mailing Address

50 WEST GRANADA BLVD.

House

NONPROFIT CORPORATION 'ANNUAL REPORT

1998

Principal Place of Business

50 WEST GRANADA BLVD.



FLORIDA DEPARTMENT OF STATE

FILED

May 20 1998 8:00am

Secretary of State

3. Date Incorporated or Qualified

4/22/98

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

POCUMENT # N97000004153 (9)

BALLET THEATRE OF FLORIDA, INC.

ORMOND BEACH FL 32174 ORMOND BEACH FL 32174 07/22/1997 4. EEI Number Applied For Not Applicable 2. Principal Place of Business 2a. Mailing Address \$8.75 Additional 5. Certificate of Status Desired 26 Fee Required <del>as above</del> Suite, Spire, as above Sulte, Apt. Same \$5.00 May Be 6. Election Campaign Financing Added to Fees 22 27 Trust Fund Contribution City & State City & State 7. Is this nonprofit corporation a homeowners association? Yes ☐ No 23 28 Country Zlp Country Zip This corporation owes or has paid the current year Intangible ☐ Yes 24 29 Personal Property Tax due June 30. 25 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 same BRADSHAW, JANE K 82 Street Address (P.O. Box Number is Not Acceptable) 50 WEST GRANADA BLVD. 83 ORMONO BEACH FL 32174 84 City Zip Code 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes. SIGNATURE (NOTE Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and little if applicable 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13 Change DELETE Addition 1.1 TITLE TITLE President KONKEL, PEGGY NAME 1.2 NAME Boswell, 6 IRONWOOD CT. 1.3 STREET ADDRESS STREET ADDRESS 264 Timberline ORMOND BEACH FL 32174 CITY - ST - ZIF 1.4 CITY - ST - ZIP DELETE Change Addition 2111118 TITLE EDWARDS, I.L. Jr. **EDWARDS**, I L JR. NAME 2.2 NAME 510 SOUTH BEACH ST. #7 510 South Beach 2.3 STREET ADDRESS STREET ADDRESS **ORMOND BEACH FI. 32174** Drond CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE Addition TITLE 3.1 TITLE ecretan Jane, **BOSWELL**, JACK 3.2 NAME 132 Riverwalk Ct. **264 TIMBERLINE TRAIL** STREET ADDRESS 3.3 STREET ADDRESS Beach FL. 32176 **ORMOND BEACH FL 32174** Ormond CITY-ST-ZIP 3.4. CITY - ST - ZIF DELETE Change ■ Addition TITLE 4.1 TITLE Treasurer Carpline **GLOVER, JANE** Brudshaw NAME 4. 2 NAME 22 Country Club DV. 132 RIVERWALK COURT 4.3 STREET ADDRESS STREET ADDRESS Beach E. **ORMOND BEACH FL 32174** ろえいつに 4.4 CITY - ST - ZIP CITY-ST-ZIP Addition DELETE Change TITLE 5.1 TITLE **BRADSHAW, JANE K** 5.2 NAME NAME 84 SOUTH BEACH #106 STREET ADDRESS 5.3 STREET ADDRESS **ORMOND BEACH FL 32174** CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition 6.1 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 14. Thereby 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 annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under cath; 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.