


# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 25, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # N99000004376</b>	
1. Entity Name <b>BALLET SOUTH INCORPORATED</b>	

Principal Place of Business <b>160 JAFFA DR. FERN PARK, FL 32730</b>	Mailing Address <b>160 JAFFA DR. FERN PARK, FL 32730</b>
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01052007 No Chg-NP CR2E037 (4/06)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>59-3592656</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent  <b>SULTZBACH, RUSSELL 510 COACHLIGHT WAY WINTER PARK, FL 32792</b>
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**DO NOT WRITE  
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.	
SIGNATURE: <i>Russell Sultzbach</i> <small>Signature, typed or printed name of registered agent and title if applicable.</small>	<i>Russell Sultzbach</i> <b>President</b> <i>Director</i> <small>(NOTE: Registered Agent signature required when reinstating)</small>
	<i>01-21-07</i> <small>DATE</small>

<b>Filing Fee is \$81.25 Due by May 1, 2007</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SULTZBACH, RUSSELL 510 COACHLIGHT WAY WINTER PARK, FL 32792
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WALSH, PATTI 633 GREEN MEADOW AVE MAITLAND, FL 32751
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HILL, KATIE 1919 CORNETT PLACE KISSIMMEE, FL 34741
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LUSE, MARY HELYN 2528 READING DR ORLANDO, FL 32804
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000602636  
01/26/07-80098-009 8.75

U00000602636  
01/26/07-80098-010 61.25

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <i>Russell Sultzbach</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	<i>Russell Sultzbach</i> <b>President</b> <i>Director</i> <i>01-21-07</i> <b>407 831-1770</b> <small>Date Daytime Phone #</small>