

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 06, 2007 8:00 am**  
**Secretary of State**

02-06-2007 90012 019 \*\*\*150.00

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01222007 Chg-P CR2E034 (12/06)

<b>DOCUMENT # P04000081706</b> 1. Entity Name <b>ASHLEY'S PERFORMING ARTS CENTER, INC.</b>			
Principal Place of Business <b>12785 W. FOREST HILL BLVD STE. 8E WELLINGTON, FL 33414</b>		Mailing Address <b>12785 W. FOREST HILL BLVD STE. 8E WELLINGTON, FL 33414</b>	
2. Principal Place of Business - No P.O. Box # <b>941 S. Military Trail</b> Suite, Apt. #, etc. <b>Unit F10</b> City & State <b>West Palm Beach, FL</b> <b>33415</b> Country		3. Mailing Address <b>941 S. Military Trail</b> Suite, Apt. #, etc. <b>Unit F10</b> City & State <b>West Palm Beach, FL</b> <b>33415</b> Country	
4. FEI Number <b>20-1171845</b>		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75</b> Additional Fee Required	
6. Name and Address of Current Registered Agent  <b>FERRARO, FRANK A CPA 3601 SE OCEAN BLVD STUART, FL 34996</b>		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) <b>Suite 005</b> City <b>FL</b> 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>			
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	
<b>10. OFFICERS AND DIRECTORS</b>		<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>P</b> <b>COHEN, ASHLEY R</b> <b>12875 W. FOREST HILL BLVD., STE 8E</b> <b>WELLINGTON, FL 33414</b>	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>941 S. Military Trail Unit F10</b> <b>West Palm Beach, FL 33415</b>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>V</b> <b>MORELAND, DAVID</b> <b>508 SE MEADOWS WOOD WAT</b> <b>STUART, FL 34997</b>	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>508 SE Meadow Wood Way</b>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>ST</b> <b>MORELAND, CHARLENE</b> <b>508 SE MEADOWS WOOD WAT</b> <b>STUART, FL 34997</b>	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>508 SE Meadow Wood Way</b>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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 607, 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.			
<b>SIGNATURE:</b> <u>Ashley Cohen</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		Date <u>1/29/07</u>	Daytime Phone # <u>561-7931122</u>