

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000053362

**FILED**  
**Apr 18, 2011**  
**Secretary of State**

**Entity Name:** LABELLE PERFORMING ARTS INC

**Current Principal Place of Business:**

1809 KINGSWAY CIRCLE  
CANTONMENT, FL 32533

**New Principal Place of Business:**

8253 CHELLIE ROAD  
PENSACOLA, FL 32533

**Current Mailing Address:**

1809 KINGSWAY CIRCLE  
CANTONMENT, FL 32533

**New Mailing Address:**

**FEI Number:** 20-8968154

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BEASLEY, JEANNIE  
1809 KINGSWAY CIRCLE  
CANTONMENT, FL 32533 US

**Name and Address of New Registered Agent:**

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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** BEASLEY, JEANNIE  
**Address:** 1809 KINGSWAY CIRCLE  
**City-St-Zip:** CANTONMENT, FL 32533

**Title:** VP  
**Name:** BEASLEY, BRIAN  
**Address:** 1809 KINGSWAY CIRCLE  
**City-St-Zip:** CANTONMENT, FL 32533

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

**SIGNATURE:** JEANNIE BEASLEY

PRES

04/18/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date