

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northington
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAY -1 AM 9:23

DOCUMENT # 738786 (3)

1. Corporation Name

NATIONAL DANCE TEACHERS ASSOCIATION OF AMERICA,
INC.

Principal Place of Business

Mailing Address

825 NW 13TH ST
SUITE 210
BOCA RATON FL 33486

825 NW 13TH ST
SUITE 210
BOCA RATON FL 33486

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 04/22/1977 3a. Date of Last Report 04/21/1994

4. FEI Number 59-1846975 Applied For Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ \$68.75 Supplemental Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21. MOLNAR, PATRICIA
Suite, Apt. #, etc.

26. MOLNAR, PATRICIA
Suite, Apt. #, etc.

22. 3031 N OCEAN DR #305
City & State

27. 3031 N OCEAN DR #305
City & State

23. FT LAUDERDALE FL
Zip Country

28. FT LAUDERDALE FL
Zip Country

24. Zip Country

29. Zip Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FOX, LEE
825 NW 13TH ST
SUITE 210
BOCA RATON FL 33486

81. Name EISENFELD, JANE
82. Street Address (P.O. Box Number is Not Acceptable) 7591 STIRLING BRIDGE BLVD N
83. DELRAY BEACH FL. 33446
84. City FL 85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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. Each 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 607.0505, Florida Statutes.

SIGNATURE *Jane Eisenfeld* JANE EISENFELD DT
(NOTE: Registered Agent signature required when reappointing)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P
NAME FOX, LEE
STREET ADDRESS 825 NW 13TH ST #210
CITY-ST-ZIP BOCA RATON FL

11. TITLE ☒ Change ☐ Addition
12. NAME
13. STREET ADDRESS
14. CITY-ST-ZIP 3031 N OCEAN DR #305 FT LAUDERDALE FL

TITLE V
NAME MCDONALD, BOBBYE
STREET ADDRESS 4350 NE 15TH AVE
CITY-ST-ZIP FT LAUDERDALE FL

21. TITLE ☐ Change ☐ Addition
22. NAME
23. STREET ADDRESS
24. CITY-ST-ZIP

TITLE SD
NAME BARNES, GWEN
STREET ADDRESS 7360 NW 5TH ST
CITY-ST-ZIP MIAMI FL

31. TITLE ☐ Change ☐ Addition
32. NAME
33. STREET ADDRESS
34. CITY-ST-ZIP

TITLE DT
NAME MOLNAR, PATRICIA
STREET ADDRESS 3031 N OCEAN DR #305
CITY-ST-ZIP FT LAUDERDALE FL

41. TITLE ☒ Change ☐ Addition
42. NAME EISENFELD, JANE
43. STREET ADDRESS 7591 STIRLING BRIDGE BLVD N
44. CITY-ST-ZIP DELRAY BEACH FL. 33446

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

51. TITLE ☐ Change ☐ Addition
52. NAME
53. STREET ADDRESS
54. CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

61. TITLE ☐ Change ☐ Addition
62. NAME
63. STREET ADDRESS
64. CITY-ST-ZIP

REMITTED BY MAY 1

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(a), 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 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: JANE EISENFELD

Jane Eisenfeld

1-407-496-4447

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #