

DOCUMENT # 738786

1. Entity Name
NATIONAL DANCE TEACHERS ASSOCIATION OF AMERICA,

FILED
Jan 10, 2001 8:00 am
Secretary of State

01-10-2001 90064 036 ****61.25

Principal Place of Business
825 N.W. 13TH STREET
BOCA RATON FL 33486
US

Mailing Address
12268 SAG HARBOR CT
UNIT #7
WELLINGTON FL 33414
US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
825 NW 13ST.
Suite, Apt. #, etc. # 210

3. Mailing Address
S.A.A.

City & State
BOCA RATON, Fla.

City & State

Zip
33486

Country

Zip

Country

4. FEI Number
59-1846975

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent
MARLOW, HOWARD
12268 SAG HARBOR CT
UNIT #7
WELLINGTON FL 33414

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City FL 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.

SIGNATURE HOWARD MARLOW Howard Marlow
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW:
FEE IS \$61.25

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

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Delete
P	PEIFFER, GWEN	7360 NW 5 ST	MIAMI FL 33126	☒
VPD	WEIMER, SAM	6450 SW 42 ST	DAVE FL 33314	☐
D	PEIFFER, GWEN	7360 NW 5TH ST	MIAMI FL 33126	☒
TD	MARLOW, HOWARD	12268 SAG HARBOR CT #7	WELLINGTON FL 33414	☐
				☐
				☐

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
P	LEE FOX	825 N.W. 13ST. # 210	BOCA RATON, Fla. 33486	☐	☒
	SYLVIA ROSENBLATT	CENTURY VILLAGE	WELLINGTON, B 306 - WPB Fla. 33417	☐	☒
				☐	☐
				☐	☐

12. I hereby 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 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: Howard Marlow HOWARD MARLOW
Signature and typed or printed name of signing officer or director

Date 1/5/01 Daytime Phone # 561-793-5370

CR2E037 (10/00)