

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

AMENDED

03-31-2008 90024040***61.25
738786

FILED

2008 APR 10 PM 4:21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



03172008 Chg-NP CR2E037 (12/08)

DOCUMENT # 738786					
1. Entity Name NATIONAL DANCE TEACHERS ASSOCIATION OF AMERICA, INC.					
Principal Place of Business 2309 E ATLANTIC BLVD POMPANO BEACH, FL 33062 US			Mailing Address 2309 E ATLANTIC BLVD POMPANO BEACH, FL 33062 US		
2. Principal Place of Business - No P.O. Box # 2309 E ATLANTIC BLVD		3. Mailing Address 90 TAX HELP, INC.			
Suite, Apt. #, etc.		Suite, Apt. #, etc. 1730 S. FEDERAL HWY. STE #260			
City & State POMPANO BEACH, FL.		City & State DELRAY BEACH, FL.		4. FEI Number 59-1846975	
Zip 33062	Country U.S.	Zip 33483	Country U.S.	5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent MARLOW, HOWARD 12288 SAG HARBOR CT UNIT #7 WELLINGTON, FL 33414			7. Name and Address of New Registered Agent Name W. J. TREMBLAY, EA Street Address (P.O. Box Number is Not Acceptable) 90 TAX HELP INC. 1730 S. FEDERAL HWY. STE #260 City DELRAY BEACH FL Zip Code 33483		
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 W. J. Tremblay Signature, typed or printed name of registered agent and title, if applicable.			DATE 03/21/2008 (NOTE: Registered Agent signature required when reinstating)		
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees		Make Check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD PEIFFEL, GWEN 1360 NW 5TH ST MIAMI, FL 33126 ☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP D MARIE KASTENBAUER 301 N. OCEAN BLVD #2402 POMPANO BEACH, FL 33062 ☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD MARLOW, HOWARD 12288 SAG HARBOR CT #7 WELLINGTON, FL 33414 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GARDENER, RON 2309 E ATLANTIC BLVD POMPANO BEACH, FL 33062 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D P ☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DONALDSON, KAREN 2309 E ATLANTIC BLVD POMPANO BEACH, FL 33062 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D S ☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ 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 817, 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: KAREN DONALDSON, SEC.			DATE 03/21/2008 782-7760 (954)		

4/10/08