


**2008 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**May 01, 2008 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # F01000005333</b> 1. Entity Name JUPITER DANCE THEATER, INC.	
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Principal Place of Business 861 JUPITER PARK DR STE F JUPITER, FL 33458-8954	Mailing Address 861 JUPITER PARK DR STE F JUPITER, FL 33458-8954
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04282008 No Chg-NP CR2E037 (4/06)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 65-1101458	Applied For 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

PUMPHREY, DEBRA A  
861 JUPITER PARK DRIVE  
STE F  
JUPITER, FL 33458-8954

**DO NOT WRITE  
IN THIS SPACE**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_

**Filing Fee is \$61.25  
Due by May 1, 2008**

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

U00000937543  
05/27/08-80053-020 61.25

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP PUMPHREY, DEBRA A 861 JUPITER PARK DRIVE STE F JUPITER, FL 334588954
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BARBERIO, SARAH H 6099 EAGLES NEST DRIVE JUPITER, FL 33458
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T HALL, BARBARA A 14283 SNOWBERRY DRIVE WELLINGTON, FL 33414
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HAMILTON, NANCY B 325 RIVERSIDE DR TEQUESTA, FL 33469
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BARBERIO, MARTIN 6099 EAGLES NEST DR JUPITER, FL 33458
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

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 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:** Debra Pumphrey 4/28/08  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #