

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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FILED  
Apr 25, 2012  
Secretary of State

Entity Name: DANCE-KONNECTION, INC.

**Current Principal Place of Business:**

8299 GROVELAND AVE  
PENSACOLA, FL 32534

**New Principal Place of Business:**

**Current Mailing Address:**

8299 GROVELAND AVE  
PENSACOLA, FL 32534

**New Mailing Address:**

FEI Number:                      FEI Number Applied For (X)                      FEI Number Not Applicable ( )                      Certificate of Status Desired ( )

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

WATSON, VERNON  
8299 GROVELAND AVE  
PENSACOLA, FL 32526    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:                      PRES  
Name:                      JOHNSON, ETHEL D  
Address:                      8299 GROVELAND AVE  
City-St-Zip:                      PENSACOLA, FL 32534

Title:                      VPRE  
Name:                      WATSON, VERNON  
Address:                      6582 OAKCLIFF ROAD  
City-St-Zip:                      PENSACOLA, FL 32526

Title:                      SEC  
Name:                      MILLER, RICHARD E JR.  
Address:                      181 BOONE STREET  
City-St-Zip:                      PENSACOLA, FL 32505

Title:                      MEM  
Name:                      BELL, JERRY  
Address:                      530 WYNNHURST STREET  
City-St-Zip:                      PENSACOLA, FL 32503

Title:                      MEM  
Name:                      SAMUEL-RUSH, KATHY  
Address:                      GROVELAND AVE  
City-St-Zip:                      PENSACOLA, FL 32534

Title:                      MEM  
Name:                      MCCASKILL, PRATT  
Address:                      8601 AIRWAY DRIVE  
City-St-Zip:                      PENSACOLA, FL 32534

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: VERNON WATSON

VP

04/25/2012

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

\_\_\_\_\_ Date