

**2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

**FILED  
Apr 07, 2009  
Secretary of State**

DOCUMENT# N93000002805

**Entity Name:** CHILDREN'S ATHLETIC NETWORK AND DANCE OPPORTUNITIES, INC.

**Current Principal Place of Business:**

13611 N. FLORIDA AVE  
TAMPA, FL 33613 US

**New Principal Place of Business:**

**Current Mailing Address:**

13611 N. FLORIDA AVE  
TAMPA, FL 33613 US

**New Mailing Address:**

**FEI Number:** 59-3193026      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

PEREZ, JESSICA L MS  
7805 N. GLEN AVENUE  
TAMPA, FL 33614 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: JESSICA PEREZ

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: SD ( ) Delete  
Name: PEREZ, JESSICA L  
Address: 7805 N. GLEN AVE.  
City-St-Zip: TAMPA, FL 33614 US

Title: VD ( ) Delete  
Name: MILLS, LINDA  
Address: 3955 VERSAILLES DR  
City-St-Zip: TAMPA, FL 33634 US

Title: PD ( ) Delete  
Name: FARRIS, DAVE  
Address: 3345 FOX RIDGE CIR  
City-St-Zip: TAMPA, FL 33618 US

Title: DIR ( ) Delete  
Name: BAUMAN, DEBRA  
Address: 14129 STONEGATE DRIVE  
City-St-Zip: TAMPA, FL 33624 US

Title: DIR ( ) Delete  
Name: WOLF-ERICKSON, HEATHER  
Address: 16213 SEPTEMBER DRIVE  
City-St-Zip: LUTZ, FL 33549 US

Title: TD ( ) Delete  
Name: BARRETT, JACK M  
Address: 13850 SHELDON ROAD  
City-St-Zip: TAMPA, FL 33626 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: SD (X) Change ( ) Addition  
Name: MILLS, LINDA  
Address: 3955 VERSAILLES DR  
City-St-Zip: TAMPA, FL 33634 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: LINDA MILLS

VD

04/07/2009

Electronic Signature of Signing Officer or Director

Date