

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000002805

FILED
Mar 20, 2011
Secretary of State

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

Current Principal Place of Business:

13621 N. FLORIDA AVE
TAMPA, FL 33613 US

New Principal Place of Business:

Current Mailing Address:

13621 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 ()

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: SD
Name: BAUMAN, DEBRA
Address: 13621 N. FLORIDA AVE
City-St-Zip: TAMPA, FL 33613 US

Title: VD
Name: MILLS, LINDA
Address: 13621 N. FLORIDA AVE
City-St-Zip: TAMPA, FL 33613 US

Title: PD
Name: FARRIS, DAVE
Address: 13621 N. FLORIDA AVE
City-St-Zip: TAMPA, FL 33613 US

Title: DIR
Name: BAUMAN, DEBRA
Address: 13621 N. FLORIDA AVE
City-St-Zip: TAMPA, FL 33613 US

Title: DIR
Name: BARNES, RAISA
Address: 13621 N. FLORIDA AVE
City-St-Zip: TAMPA, FL 33613 US

Title: TD
Name: BARRETT, JACK M
Address: 13621 N. FLORIDA AVE
City-St-Zip: TAMPA, FL 33613 US

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: RAISA BARNES

MS

03/20/2011

Electronic Signature of Signing Officer or Director

Date