

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

04 AUG 18 AM 8:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N93000005245

1. Corporation Name
The Institute of Dance Arts, Inc.

2. Principal Office Address
900-C ANASTASIA BLVD.

3. Mailing Office Address
SAME

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
St. AUGUSTINE, FL

City & State

Zip
32080

Country
USA

Zip

Country

07-11-03 90054 023 \$61.25

4. Date Incorporated or Qualified To Do Business in Florida
1994

5. FEI Number
59-3210719

Applied For
Not Applicable

6. CERTIFICATE OF STATUS DESIRED \$8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name
Karen Kempler

Street Address (P.O. Box Number is Not Acceptable)
30 Lee Drive

400040300094

Suite, Apt. #, Etc.

08/18/04 01060 001 **61.25

City
St. Augustine

State
FL

Zip Code
32080

8. I, being appointed the registered agent of the above named Corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of Registered Agent
Karen Kempler
REGISTERED AGENT MUST SIGN

Date
7/16/04

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P	Karen Kempler	30 LEE DRIVE	St. Augustine, FL 32080
VP	ELIE Bottomley	47 Ocean Court	St. Augustine, FL 32080
T	Barbara Battelle	36 Beachside Drive	Palm Coast, FL 32137
S	Judy Till	410 Tradewind Lane	St. Augustine, FL 32080

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: *Karen Kempler*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Karen Kempler

Date
7/16/04

Daytime Phone #
904-829-1617

CR2E081 (07/04)

INSTITUTE OF DANCE ARTS, INC., d.b.a.

The Dance Company

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900 - C Anastasia Boulevard
St. Augustine, Florida 32080

904/829-1617

July 16, 2004

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: The Institute of Dance Arts, Inc. Reinstatement

Please consider a waiver of reinstatement fees for the non-profit corporation The Institute of Dance Arts as a State of Florida Corporation. The annual report was sent in a timely manner along with payment and returned for additional signatures. The signatures were added and re-sent to the Division of Corporations.

The report did not reach your office due to postal system problems but our check did clear the bank at that time leading us to believe that our report was filed properly.

A reinstatement application is included with this letter. Please let me know if there is anything else you will need. Thank you.

Sincerely,

A handwritten signature in cursive script that reads "Jean M. Courter".

Jean M. Courter
Administrative Director