2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N9300005245

Entity Name: INSTITUTE OF DANCE ARTS INCORPORATED

Current Principal Place of Business:

370 A1A BEACH BLVD ST AUGUSTINE, FL 32080

Current Mailing Address:

370 A1A BEACH BLVD ST AUGUSTINE, FL 32080 US

FEI Number: 59-3210719

Name and Address of Current Registered Agent:

BURKHARDT, STEPHANIE 370 A1A BEACH BLVD ST AUGUSTINE, FL 32080 US Certificate of Status Desired: No

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

Officer/Director Detail :

	Title	OTHER, ARTISTIC DIRECTOR	Title	PRESIDENT
	Name	BURKHARDT, STEPHANIE	Name	EVANS, DANA
	Address	370 A1A BEACH BLVD	Address	370 A1A BEACH BOULEVARD
	City-State-Zip:	ST AUGUSTINE FL 32080	City-State-Zip:	ST. AUGUSTINE FL 32080
	Title	TREASURER	Title	SECRETARY, VP
	Name	BRANSON, CAROL	Name	STONAKER, SHAWN
	Address	370 A1A BEACH BLVD	Address	370 A1A BEACH BLVD
	City-State-Zip:	ST AUGUSTINE FL 32080	City-State-Zip:	ST AUGUSTINE FL 32080
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	Title	BOARD MEMBER	Title	BOARD MEMBER
	Name		Name	HELMS, AILINE
		WARRING, CASSONJA	Hamo	
	Address	370 A1A BEACH BLVD	Address	370 A1A BEACH BLVD
	Address	370 A1A BEACH BLVD SAINT AUGUSTINE FL 32080	Address City-State-Zip:	370 A1A BEACH BLVD SAINT AUGUSTINE FL 32080
	Address	370 A1A BEACH BLVD	Address	370 A1A BEACH BLVD
	Address City-State-Zip:	370 A1A BEACH BLVD SAINT AUGUSTINE FL 32080	Address City-State-Zip:	370 A1A BEACH BLVD SAINT AUGUSTINE FL 32080
	Address City-State-Zip: Title	370 A1A BEACH BLVD SAINT AUGUSTINE FL 32080 BOARD MEMBER	Address City-State-Zip: Title	370 A1A BEACH BLVD SAINT AUGUSTINE FL 32080 BOARD MEMBER
	Address City-State-Zip: Title Name	370 A1A BEACH BLVD SAINT AUGUSTINE FL 32080 BOARD MEMBER BARTIMUS, LINDA 370 A1A BEACH BLVD.	Address City-State-Zip: Title Name	370 A1A BEACH BLVD SAINT AUGUSTINE FL 32080 BOARD MEMBER CRUCE, LEAA

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: STEPHANIE BURKHARDT

REGISTERED AGENT 02/10/2021

Date

Electronic Signature of Signing Officer/Director Detail

Date