FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENTOR STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 710721

1325 N.W. 2ND ST.

STREET ADDRESS

(2)

DANCE ALIVE, INC.

Principal Place	e of Business	Mailing Address				at bizis aratı debit albis albis ardır ibus	
1325 NW 2ND ST Jainesville Fl 32801		1325 NW 2ND ST Gainesville FL 32601-4260					
					3. Date Incorporated or Qualified 04/14/1966	3a. Date of Last Report 04/19/1996	
2. Principal Place of Business 21		2a. Mailing Address			4. FEt Number 23-7348157	Applied For Not Applicable	
Sulte, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip 24	Country 25	Zíp Cou 29 30		гу	8. This corporation has liability for	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	
<u> </u>	9. Name and Address of Curren		1001		10. Name and Address of New Ro	gistered Agent	
			8	1 Name			
SKINNER, JUDY 1325 NW SECOND ST				2 Street	Address (P.O. Box Number is Not Accepta	ble)	
GAINESVILLE, FL			8	3			
32601			8	4 City		FL 85 Zip Code	
office or r agent. I a SIGNATURE	to the provisions of Sections 617.050; egistered agent, or both, in the State marmiliar with, and according to egistered agent, typed or providearis of registered agent.	of Florida, Such change was ations of Section 617,0503, Fl	avthorized l orida Statut	by the corp	corporation submits this statement for the poration's board of directors. I hereby according to the property of the property o	purpose of changing its registered pt the appointment as registered	
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTORS IN 12	
TITLE	PD	DELETE	1.1 TITLE	P.	PD	Change Addition	
NAME	BRADBURY, STAR	ADBURY, STAR 1.2			Weaver Gaines -	Drive	
STREET ADDRESS			1.3 STRE	Weaver gaines 12085 Research Drive ST-ZIP Alachua, Fl 32415			
CITY-ST-ZIP	A A A A A A A A A A A A A A A A A A A		1.4 CiTY	- ST - ZIP	Alachua, FI 32412		
TITLE	TD	DELETE	21 TITLE		P.O. Box 1202. Qainesville, Fl. 320	Change Addition	
NAME	MONAHAN, GAIL		22 NAM	Ε	DA. BOX 1202	3/NA	
STREET ADDRESS	240 SW 1ST STREET		2.3 STRE	ET ADDRESS	O marille to and	AL DONE	
CITY-ST-ZIP	GAINESVILLE FL		2. 4 CITY	-ST-ZIP	gainesville, Fl. 320	04-00	
TITLE	ED	DELETE	31 TITLE			Change Addition	
NAME	SKINNER, JUDY		3.2 NAM	E			
STREET ADDRESS	1325 N.W. 2ND ST.		3.3 STRE	ET ADDRESS			
CITY-ST-ZIP	GAINESVILLE, FL 00000	/	3.4. CITY	- ST - ZIP			
TITLE	VO	DELETE	4.1 TITLE			Change Addition	
NAME	GAINES, WEAVER		4.2 NAM	lE .			
STREET ADDRESS	12085 RESEARCH DRIVE		4.3 STRE	ET ADDRESS			
CITY-ST-ZIP	ALACHUA FL		4.4 CITY	-ST-ZIP			
TITLE	SD	☐ DELETE	5.1 TITLE			Change Addition	
NAME	STEVIE TISON-WALSH		5.2 NAM	E			
STREET ADDRESS	7820 S.W. 102 AVE.		5.3 STRE	ET ADDRESS			
CITY-ST-ZIP	GAINESVILLE FL		5.4 CITY	-ST-ZIP			
TITLE	AD	☐ DELETE	6.1 TITLE			Change Addition	
NAME	TUTTLE, KIM		6.2 NAM	E			

6.3 STREET ADDRESS

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 3 if charged or on an attachment with an address.

FILED

Jun 13 1997 8:00am

Secretary of State