2004 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

04 DEC 20 AM 9:01

DOCUMENT # 710721

1. Entity Name
DANCE ALIVE, INC.

Principal Place of Business	Mailing Address
1325 NW 2ND ST GAINESVILLE, FL 32601	1325 NW 2ND ST GAINESVILLE, FL 32601

12102004 Chg-NP CR2E037 (10/03)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 23-7348157 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

SKINNER, JUDY
1325 NW SECOND ST
GAINESVILLE, FL 32601

7. Name and Address of New Registered Agent

Name: Kim Tuttle
Street Address (P.O. Box Number is Not Acceptable): 1325 NW second St
Gainesville FL 32601
City: FL Zip Code: 32601

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: [signature] 12/14/04
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Amended AR is $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P BACHARACH, MEREDITH 1638 NW 10TH AVE GAINESVILLE, FL 32605	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DIRECTOR ELAINE BROWN 525 Turkey Creek Alachua FL 32607	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD HANRAHAN, PEGEEN 1938 NW 7TH LN GAINESVILLE, FL 32603	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director/HISTORIAN Colleen Rand 2220 NW 3rd Pl Gainesville FL 32603	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ED MARKELL, JUDITH 439 NW 50TH BLVD GAINESVILLE, FL 32607	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director/Treasurer Jennifer Lester 203 NE 1st St Gainesville FL 32601	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PE HORNBECK, DOUG 3120 SE 27TH ST GAINESVILLE, FL 32641	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director Ana Marie Solor 1714 SW 34 St Gainesville FL 32607	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD MURPHEY-JONES, DIANNE 6906 CRYSTAL LAKE RD KEYSTONE HEIGHTS, FL 32656	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director Elaine Taylor 9710 SW 43rd Ter Gainesville FL 32608	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	AD TUTTLE, KIM 1325 N.W. 2ND ST. GAINESVILLE, FL 32601	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	500043485175 12/17/04--01030--017 **61.25	☐ Change ☐ Addition

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [signature] KIM TUTTLE 12/14/04 (352) 373-1166
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

12/20