

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2006 8:00 am
Secretary of State

04-28-2006 90167 006 ****61.25

DOCUMENT # 710721 1. Entity Name DANCE ALIVE, INC.					
Principal Place of Business 1325 NW 2ND ST GAINESVILLE, FL 32601			Mailing Address 1325 NW 2ND ST GAINESVILLE, FL 32601		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State Zip Country			City & State 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 TUTTLE, KIM 1325 NW SECOND ST GAINESVILLE, FL 32601				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE					
Filing Fee is \$61.25 Due by May 1, 2006		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	D BROWN, ELAINE 525 TURKEY CREEK ALACHUA, FL 32607	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DH RAND, COLLEEN 2220 NW 3RD PL GAINESVILLE, FL 32603	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT LESTER, JENNIFER 203 NE 1ST STREET GAINESVILLE, FL 32601	☒ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MURPHEY, DIANNE 6906 CRYSTAL LAKE RD KEYSTONE HEIGHTS, FL 32656	☒ Delete			
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	T Bacharach, Meredith 1638 NW 10th Ave Gainesville FL 32605	☒ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Houston, Sherry 5011 NW 51st Pl Gainesville FL 32653	☐ Change ☒ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Connolly, Elaine 2735 SW 35th Pl Gainesville FL 32608	☐ Change ☒ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Funk, Elaine 3445 NW 30th Blvd. Gainesville FL 32605	☐ Change ☒ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Holmes, Courtney 603 NE 4th Ave #B Gainesville FL 32601	☐ Change ☒ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Taylor, Elaine 9710 SW 43rd Terr Gainesville FL 32608	☐ Change ☒ Addition			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 _____		Kim Tuttle		4/25/06 352/371-2986	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date		Daytime Phone #	