2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 03, 2009
Secretary of State

DOCUMENT# 710721

Entity Name: DANCE ALIVE, INC.

Current Principal Place of Business:

1325 NW 2ND ST
GAINESVILLE, FL 32601

New Principal Place of Business:

1325 NW 2ND ST
GAINESVILLE, FL 32601 US

Current Mailing Address:

1325 NW 2ND ST
GAINESVILLE, FL 32601

New Mailing Address:

1325 NW 2ND ST
GAINESVILLE, FL 32601 US

FEI Number: 23-7348157 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TUTTLE, KIM
1325 NW SECOND ST
GAINESVILLE, FL 32601 US

Name and Address of New Registered Agent:

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 — Date

OFFICERS AND DIRECTORS:

Title: PRES ( ) Delete
Name: CANNON, TIM
Address: 7301 NW 52ND TERR
City-St-Zip: GAINESVILLE, FL 32653 US

Title: VP ( ) Delete
Name: GAINES, WEAVER
Address: 9922 SW 41ST RD
City-St-Zip: ALACHUA, FL 32607 US

Title: SHD ( ) Delete
Name: RAND, COLLEEN
Address: 2220 NW 3RD PL
City-St-Zip: GAINESVILLE, FL 32603 US

Title: TREA ( ) Delete
Name: TAYLOR-MCCALL, ELAINE
Address: 9710 SW 43RD TER
City-St-Zip: GAINESVILLE, FL 32608 US

Title: AD ( ) Delete
Name: TUTTLE, KIM
Address: 1325 NW 2ND STREET
City-St-Zip: GAINESVILLE, FL 32601 US

Title: PP ( ) Delete
Name: FUNK, ELAINE
Address: 3445 NW 30TH BLVD
City-St-Zip: GAINESVILLE, FL 32605 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change ( ) Addition
Name: NEVILL, DOROTHY
Address: 2320 NW 24TH TER
City-St-Zip: GAINESVILLE, FL 32605 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: KIM TUTTLE AD 03/03/2009
Electronic Signature of Signing Officer or Director — Date