

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 753771

FILED
May 19, 2009
Secretary of State

Entity Name: FLORENE LITTHCUT INNER-CITY CHILDREN'S TOURING DANCE COMPANY, INC.

Current Principal Place of Business:

CARRIE P. MERK CENTER
CITY OF MIAMI/ 1300 N.W. 50 ST.
MIAMI, FL 33142 US

New Principal Place of Business:

Current Mailing Address:

4120 NW 8TH AVE.
MIAMI, FL 33127 US

New Mailing Address:

FEI Number: 59-2032637 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

NICHOLS, FLORENE L
4120 NW 8 AVENUE
MIAMI, FL 33127 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: TD () Delete
Name: ADDERLY, KEVIN CPA
Address: 310 NE 175 ST
City-St-Zip: N MIAMI, FL 33131

Title: DPAR (X) Delete
Name: CODY, CARLA ESQ
Address: 1350 NW 12 AVE
City-St-Zip: MIAMI, FL 33136

Title: CD () Delete
Name: WRIGHT- PERKINS, KAYSHONE
Address: 2471 N.W. 175TH STREET
City-St-Zip: MIAMI, FL 33056

Title: SD () Delete
Name: LAMAR, VERONICA
Address: 420 NW 90 STREET
City-St-Zip: MIAMI, FL 33150

Title: VCD () Delete
Name: STAFFORD, CYNTHIA ESQ
Address: 3575 NW 80 ST
City-St-Zip: MIAMI, FL 33147

Title: EXD () Delete
Name: NICHOLS, FLORENE L
Address: 4120 NW 8 AVE
City-St-Zip: MIAMI, FL 33127

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
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Address:
City-St-Zip:

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

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

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: FLORENE LITTHCUT NICHOLS

EXDI

05/19/2009

Electronic Signature of Signing Officer or Director

Date