2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT#762696

FILED Mar 16, 2005 Secretary of State

Entity Name: RIVER CITY DANCE CLUB, INC.

Current Principal Place of Business: New Principal Place of Business:

P O BOX 1494 2908 MEADOWS LANE PALATKA, FL 32178 US PALATKA, FL 32177 U

Current Mailing Address: New Mailing Address:

P O BOX 1494 2908 MEADOWS LANE PALATKA, FL 32178 US PALATKA, FL 32177 US

FEI Number: 59-2222157 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: Name and Address of New Registered Agent:

COYLE, JANICE R GRABHORN, CATHERINE W
111 SKEET CLUB ROAD 2908 MEADOWS LANE
PALATKA, FL 32177 US PALATKA, FL 32177 US

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: CATHERINE W GRABHORN 03/16/2005

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

PALATKA, FL 32177

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

le: PD () Delete Title: PD (X) Change () Addition

Name: COYLE, JANICE R Name: ROSACIA, JERRY
Address: 111 SKEET CLUB ROAD Address: P. O. BOX 383

City-St-Zip: PALATKA, FL 32177 City-St-Zip: INTERLACHEN, FL 32148

Title: SD () Delete Title: STD (X) Change () Addition

Name: KONJAT, EUNICE Name: KONJAT, EUNICE
Address: 7204 TIERRA WOODS DRIVE Address: 7204 TIERRA WOODS DRIVE

City-St-Zip: PALATKA, FL 2177

 Title:
 AD
 () Delete
 Title:
 VPD
 (X) Change () Addition

 Name:
 HORNER, SHIRLEY
 Name:
 GRABHORN, CATHERINE W

 Address:
 2019 KATE STREET
 Address:
 2908 MEADOWS LANE

City-St-Zip: PALATKA, FL 32177 City-St-Zip: PALATKA, FL 32177

Title: TD (X) Delete Title: () Change () Addition Name: COYLE, WILLIAM A Name: Address: 111 SKEET CLUB ROAD Address:

I hereby certify that the information supplied with this filing does not qualify for the 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 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.

City-St-Zip:

SIGNATURE: CATHERINE W GRABHORN VPD 03/16/2005