

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000075733

FILED  
Jan 20, 2009  
Secretary of State

**Entity Name:** DANCEREXTRAORDINAIRE MANAGEMENT AGENCY OF FLORIDA LLC

**Current Principal Place of Business:**

2115 BOW LANE  
SAFETY HARBOR, FL 34695

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1372  
SAFETY HARBOR, FL 34695

**New Mailing Address:**

**FEI Number:** 80-9236834

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

WAISMAN, ATHENA B  
2115 BOW LANE  
SAFETY HARBOR, FL 34695 US

**Name and Address of New Registered Agent:**

MATKOVSKI, STEPAN  
2115 BOW LANE  
SAFETY HARBOR, FL 34695 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: STEPAN MATKOVSKI

01/20/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: WAISMAN, ATHENA B  
Address: 2115 BOW LANE  
City-St-Zip: SAFETY HARBOR, FL 34695

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: MATKOVSKI, STEPAN  
Address: 2115 BOW LANE  
City-St-Zip: SAFETY HARBOR, FL 34695

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: STEPAN MATKOVSKI

MGRM

01/20/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date