

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000004617

FILED
May 09, 2008
Secretary of State

Entity Name: IMANI DANCE PROGRAM FOR YOUTH DEVELOPMENT, INC.

Current Principal Place of Business:

1525 MCCASKILL AVE #3
TALLAHASSEE, FL 32310

New Principal Place of Business:

1525 MCCASKILL AVE
3
TALLAHASSEE, FL 32310

Current Mailing Address:

1525 MCCASKILL AVE #3
TALLAHASSEE, FL 32310

New Mailing Address:

1525 MCCASKILL AVE
3
TALLAHASSEE, FL 32310

FEI Number: 42-1588516 **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:

KING, KWAME
1525 MCCASKILL AVE #3
TALLAHASSEE, FL 32310 US

Name and Address of New Registered Agent:

KING, KWAME
1525 MCCASKILL AVE
3
TALLAHASSEE, FL 32310 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: KWAME KING

05/09/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: WALLACE, JESSICA
Address: 3536 ESTATES RD
City-St-Zip: TALLAHASSEE, FL 32305

Title: D () Delete
Name: KING, KWAME
Address: 1525 MCCASKILL AVE #1
City-St-Zip: TALLAHASSEE, FL 32310

Title: D () Delete
Name: DENNIS, LATOYA
Address: 3746 ROGER HAMLIN COURT
City-St-Zip: TALLAHASSEE, FL 32311

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DR. (X) Change () Addition
Name: KING, KWAME
Address: 1525 MCCASKILL AVE.#1
City-St-Zip: TALLAHASSEE, FL 32305

Title: MS. (X) Change () Addition
Name: WALLACE, JESSICA
Address: 3536 ESTATES RD
City-St-Zip: TALLAHASSEE, FL 32305

Title: MS. (X) Change () Addition
Name: DENNIS, LATOYA
Address: 3746 ROGER HAMLIN COURT
City-St-Zip: TALLAHASSEE, FL 32311

Title: MR. () Change (X) Addition
Name: MUSTAPHA, BOAMANI
Address: 1525 MCCASKILL AVE .#5
City-St-Zip: TALLAHASSEE, FL 32310

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: KWAME KING

DR.

05/09/2008

Electronic Signature of Signing Officer or Director

Date