

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000004617

FILED
Feb 22, 2010
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:

Current Mailing Address:

1525 MCCASKILL AVE
3
TALLAHASSEE, FL 32310

New Mailing Address:

FEI Number: 42-1588516

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

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
3621 RIDGE CREST ROAD
TALLAHASSEE, FL 32305 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

02/22/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DR.
Name: KING, KWAME
Address: 3621 RIDGE CREST ROAD
City-St-Zip: TALLAHASSEE, FL 32305

Title: DR.
Name: WALLACE, JESSICA
Address: 3536 ESTATES RD
City-St-Zip: TALLAHASSEE, FL 32305

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

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

Title: MS.
Name: NATALIE, PAUL
Address: 3621 ESTATESROAD
City-St-Zip: TALLAHASSEE, FL 32305

I hereby 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 all other like empowered.

SIGNATURE: KWAME KING

DR.

02/22/2010

Electronic Signature of Signing Officer or Director

Date