

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000007705

FILED  
Apr 30, 2008  
Secretary of State

**Entity Name:** ARTS IN MOTION COMMUNITY YOUTH THEATRE/ARTS EDUCATION, INC.

**Current Principal Place of Business:**

37745 CHURCH AVE  
DADE CITY, FL 33525

**New Principal Place of Business:**

**Current Mailing Address:**

P.O BOX 762  
DADE CITY, FL 33526

**New Mailing Address:**

**FEI Number:** 59-0780694

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

TWITMYER, MICHELLE  
15146 DUGGAN ROAD  
DADE CITY, FL 33525 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: VD (X) Delete  
Name: LUKACIK, DENISE  
Address: 5210 EAGLE ISLAND DR.  
City-St-Zip: LAND O' LAKES, FL 34639

Title: TD ( ) Delete  
Name: TWITMYER, MICHELLE  
Address: 15146 DUGGAN ROAD  
City-St-Zip: DADE CITY, FL 33525

Title: PD ( ) Delete  
Name: WHALEY-KELLY, JEANMARIE  
Address: 12346 WOODLANDS CIRCLE  
City-St-Zip: DADE CITY, FL 33525

Title: SD (X) Delete  
Name: ROSS, CINDY  
Address: 25217 TRADEWINDS DR.  
City-St-Zip: LAND O' LAKES, FL 34639

**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  
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: JEANMARIE WHALEY-KELLY

PD

04/30/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date