

# 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

0004053

DOCUMENT # N02000000874

1. Entity Name  
VOLUSIA DANCE THEATRE, INC.



FILED

03 NOV -3 AM 10:08

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business  
196 NORTH INDUSTRIAL DRIVE  
ORANGE CITY FL 32763

Mailing Address  
196 NORTH INDUSTRIAL DRIVE  
ORANGE CITY FL 32763

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



**REINSTATEMENT** 03

4. FEI Number  
36-0045925

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MILLS, WENDY

47 SEMINOLE DR 11012 Island Bay Circle  
DEBAY FL 32713 Sanford FL 32771

Name Mills, Wendy

Street Address (P.O. Box Number is Not Acceptable)

11012 Island Bay Circle

City Sanford

FL

Zip Code 32771

8. 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. I am familiar with, and accept the obligations of registered agent.

000023670270

10/09/03--01068--003 \*\*\$61.25

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25  
After September 10, 2003, min will be \$236.25

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

Make Check Payable to  
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE Artistic Director  
NAME Wendy J. Mills  
STREET ADDRESS 11012 Island Bay Circle  
CITY-ST-ZIP Sanford FL 32771

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
000023670270  
11/12/03--01025--006 \*\*\$175.00

☐ Change ☐ Addition

TITLE  
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CITY-ST-ZIP

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CITY-ST-ZIP

☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Wendy J. Mills*

10.1.03 407.474.1573

CR2E037 (4/03)