2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 26, 2009
Secretary of State

DOCUMENT# N02000001970

Entity Name: MUSEUM OF DANCE ARTS, INCORPORATED

Current Principal Place of Business:

3775 40 LANE SOUTH, BLDG 76, STE. I
ST PETERSBURG, FL 337115201

New Principal Place of Business:

Current Mailing Address:

3775 40 LANE SOUTH, BLDG 76, STE. I
ST PETERSBURG, FL 337115201

New Mailing Address:

FEI Number: 59-3584832 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
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:

KOLB, MICHAEL
3774 40 LANE SOUTH, BLDG 76, STE. I
ST PETERSBURG, FL 337115201 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: PRES ( ) Delete
Name: KOLB, MICHAEL
Address: 3775 40 LANE SOUTH, BLDG 76, STE. I
City-St-Zip: ST PETERSBURG, FL 337115201

Title: SEC ( ) Delete
Name: SPINNEY, MAURENA
Address: 9656 HASTINGS DR
City-St-Zip: COLUMBIA, MD 21046

Title: TREA ( ) Delete
Name: SERRANO, MICHAEL
Address: 382 CENTRAL PARK WEST, APT 7X
City-St-Zip: NEW YORK, NY 10025

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:

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: MICHAEL KOLB PRES 08/26/2009
Electronic Signature of Signing Officer or Director — Date