


**2007 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**May 02, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # N03000003505</b> 1. Entity Name ANGEL FRASER-LOGAN DANCE COMPANY	
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Principal Place of Business  
12475 SOUTH DIXIE HIGHWAY  
PINECREST, FL 33156

Mailing Address  
12475 SOUTH DIXIE HIGHWAY  
PINECREST, FL 33156



02282007 No Chg-NP CR2E037 (4/06)

4. FEI Number 77-0632810	Applied For Not Applicable
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5. Certificate of Status Desired ☐ **\$8.75** Additional  
Fee Required

**DO NOT WRITE IN THIS SPACE**

**6. Name and Address of Current Registered Agent**

SANTAMARIA, LAURA  
8750 DORAL BLVD. #270  
MIAMI, FL 33178

**DO NOT WRITE  
IN THIS SPACE**

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.

SIGNATURE \_\_\_\_\_

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

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

**Filing Fee is \$61.25  
Due by May 1, 2007**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

000000757635  
05/23/07-80079-009 61.25

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FRASER-LOGAN, ANGEL 12475 SOUTH DIXIE HIGHWAY PINECREST, FL 33156
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FRASER, LEWIS 12475 SOUTH DIXIE HIGHWAY PINECREST, FL 33156
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:** \_\_\_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/07

Date

(305)232-5573

Daytime Phone #