2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000007640

Entity Name: SOULFUL-ARTS DANCE ACADEMY, INC.

FILED Jaņ 16, 2<u>00</u>8 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

290 DR. MLK ST N STE 100

ST PETERSBURG, FL 33705

New Mailing Address: Current Mailing Address:

290 DR. MLK ST N STE 100

ST PETERSBURG, FL 33705

FEI Number: 04-3772747 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

RAYMUND, SONIA V BRODY, LISA

2801 58TH CIRCLE SOUTH 2020 BRIGHTWATERS BLVD NE

ST PETERSBURG, FL 33704 US ST PETERSBURG, FL 33712

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: LISA BRODY 01/16/2008

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition

RAYMUND, SONIA V Name: TABOR, SANDY MRS. Name: 2020 BRIGHTWATER BLVD NE Address: 1801 72ND AVENUE NE Address:

City-St-Zip: ST PETERSBURG, FL 33704 US City-St-Zip: ST. PETERSBURG, FL 33702 US

Title: Title: SEC (X) Change () Addition () Delete

JOHNSON, PAULETTE W Name: BRODY, LISA MRS. Name: Address: 4410 4 AVE S Address: 2801 58TH CIRCLE S

City-St-Zip: ST PETERSBURG, FL 33711 US City-St-Zip: ST. PETERSBURG, FL 33712 US

Title: () Delete Title: () Change () Addition

HOWELLS, JEFFREY P Name: Name: Address: 127 BAY POINT DR NE Address: City-St-Zip: ST PETERSBURG, FL 33704 US City-St-Zip:

Title: () Delete Title: (X) Change () Addition

Name: HAMILTON, KAREN Name: ENGWALL, RICHARD MR.

7542 CUMBERLAND CT. PIN. EDU. FOUNDATION, 12090 STARKEY ROAD Address: Address:

City-St-Zip: LARGO, FL 33777 US City-St-Zip: LARGO, FL 33773 US

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: LISA BRODY SEC 01/16/2008