

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Dec 16, 2009
Secretary of State

DOCUMENT# N03000007640

Entity Name: SOULFUL-ARTS DANCE ACADEMY, INC.**Current Principal Place of Business:**290 DR. MLK ST N
STE 100
ST PETERSBURG, FL 33705**New Principal Place of Business:****Current Mailing Address:**290 DR. MLK ST N
STE 100
ST PETERSBURG, FL 33705**New Mailing Address:****FEI Number:** 04-3772747**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**QUANDT, CHARLOTTE MS.
10030 11TH ST NORTH
APT. 101
ST PETERSBURG, FL 33716 US**Name and Address of New Registered Agent:**CHASE, ANTONIO MRS
3959 VAN DYKE ROAD
205
LUTZ, FL 33558 US

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: ANTONIO CHASE

12/16/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: FUDGE, MARILYN MRS.
Address: 2301 GREEN WAY SOUTH
City-St-Zip: ST. PETERSBURG, FL 33712 US

Title: VPRES () Delete
Name: ADAMS, HAVEN MRS.
Address: 4701 1ST AVE N
City-St-Zip: ST. PETERSBURG, FL 33713 US

Title: D (X) Delete
Name: ALBANO, LOU MR
Address: 1049 CENTRAL AVENUE
City-St-Zip: ST. PETERSBURG, FL 33701 US

Title: SEC () Delete
Name: STONE, MARCEY MRS.
Address: 701 6TH STREET S.
City-St-Zip: ST. PETERSBURG, FL 33701 US

Title: D (X) Delete
Name: ANDREW, OLIVIA MRS.
Address: 2072 BALFOUR CIRCLE
City-St-Zip: TAMPA, FL 33619 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: CHASE, ANTONIO MR.
Address: 3959 VAN DYKE ROAD # 205
City-St-Zip: LUTZ, FL 33558 US

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: HAVEN ADAMS

VPRES

12/16/2009

Electronic Signature of Signing Officer or Director

Date