2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000009534

Title:

Name:

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City-St-Zip:

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WINTER PARK, FL 32792

3038 ANTIQUE OAKS CIRCLE APT. #162

WHITE, SHERRI

FILED May 01, 2006 Secretary of State

Entity Name: DANCE OF DAVID MINISTRIES, INC. **Current Principal Place of Business: New Principal Place of Business:** 4921 OAKSHIRE DR 5102 BELMERE PARKWAY TAMPA, FL 33625 APT. 1402 TAMPA, FL 33624 **Current Mailing Address: New Mailing Address:** 4921 OAKSHIRE DR 5102 BELMERE PARKWAY TAMPA, FL 33625 APT. 1402 TAMPA, FL 33624 US FEI Number: 20-1580732 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 New Registered Agent: Name and Address of Current Registered Agent: FLOYD, HERBERT FLOYD, HERBERT 4921 OAKSHIRE DR 5102 BELMERE PARKWAY TAMPA, FL 33625 APT. 1402 TAMPA, FL 33624 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: 05/01/2006 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete DOUGLAS, PHYLLIS ESQ Name: Name: Address: 2259 RAVEN CIR Address: City-St-Zip: LITHONIA, GA 30058 City-St-Zip: Title: () Delete Title: (X) Change () Addition Name: WHITE, TAMMI Name: WHITE, TAMMI Address: 1584 MOUNTAIN LODGETRAIL Address: 1584 MOUNTAIN LODGE TRAIL City-St-Zip: IRONDALE, AL 35210 US City-St-Zip: IRONDALE, AL 35210 US

Title:

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I hereby certify that the information supplied with this filing does not qualify for the 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: ANGELA FLOYD MRS. 05/01/2006

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