2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 03, 2007
Secretary of State

DOCUMENT# N04000009534

Entity Name: DANCE OF DAVID MINISTRIES, INC.

Current Principal Place of Business:

5102 BELMERE PARKWAY
APT. 1402
TAMPA, FL 33624 US

New Principal Place of Business:

Current Mailing Address:

5102 BELMERE PARKWAY
APT. 1402
TAMPA, FL 33624 US

New Mailing Address:

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 Current Registered Agent:

FLOYD, HERBERT
5102 BELMERE PARKWAY
APT. 1402
TAMPA, FL 33624 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: D ( ) Delete
Name: DOUGLAS, PHYLLIS ESQ
Address: 2259 RAVEN CIR
City-St-Zip: LITHONIA, GA 30058

Title: D (X) Delete
Name: WHITE, TAMMI
Address: 1584 MOUNTAIN LODGE TRAIL
City-St-Zip: IRONDALE, AL 35210 US

Title: D (X) Delete
Name: WHITE, SHERRI
Address: 3038 ANTIQUE OAKS CIRCLE APT. #162
City-St-Zip: WINTER PARK, FL 32792

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: FLOYD, ANGELA MSW
Address: 5102 BELMERE PARKWAY APT. 1402
City-St-Zip: TAMPA, FL 33624 US

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: ANGELA FLOYD D 09/03/2007

Electronic Signature of Signing Officer or Director — Date