

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000009934

FILED
Apr 14, 2009
Secretary of State

Entity Name: P & M DANCE AND ENTERTAINMENT, INC.

Current Principal Place of Business:

10101 LANTANA RD
LAKE WORTH, FL 33467

New Principal Place of Business:

Current Mailing Address:

4162 BAHIA ISLE CIRCLE
WELLINGTON, FL 33467

New Mailing Address:

4162 BAHIA ISLE CIRCLE
WELLINGTON, FL 33449

FEI Number: 20-5592751

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CONTARTESI, PATRICIA A
4162 BAHIA ISLE CIRCLE
WELLINGTON, FL 33467 US

Name and Address of New Registered Agent:

CONTARTESI, PATRICIA A
4162 BAHIA ISLE CIRCLE
WELLINGTON, FL 33449 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: _____

Electronic Signature of Registered Agent

04/14/2009

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CONTARTESI, PATRICIA A
Address: 4162 BAHIA ISLE CIRCLE
City-St-Zip: WELLINGTON, FL 33467

Title: VP () Delete
Name: BUTLER, ROBERT M
Address: 4162 BAHIA ISLE CIRCLE
City-St-Zip: WELLINGTON, FL 33467

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: ROBERT M BUTLER

VP

04/14/2009

Electronic Signature of Signing Officer or Director

Date