

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000012907

FILED
Sep 12, 2007
Secretary of State

Entity Name: EXCELLENCE DANCE STUDIO, INC.

Current Principal Place of Business:

124 S. HARRY AVE.
MADISON, FL 32340

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 10557
TALLAHASSEE, FL 32302

New Mailing Address:

FEI Number: 20-8094996 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:

Name and Address of New Registered Agent:

FRAZIER, EMMA
282 S.E. AMMONS AVE.
MADISON, FL 32340 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

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: DUNCAN, SHERIKA
Address: 204 S. ORANGE ST.
City-St-Zip: MADISON, FL 32340

Title: D () Delete
Name: DUNCAN, NATHANIEL
Address: 196 S.W. ORANGE AVE
City-St-Zip: MADISON, FL 32340

Title: D () Delete
Name: FRAZIER, WALTER SR.
Address: RT 5 BOX 6910
City-St-Zip: MADISON, FL 32340

Title: D () Delete
Name: FRAZIER, WALTER JR.
Address: 282 S.E. AMMONS AVE.
City-St-Zip: MADISON, FL 32340

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: O/D (X) Change () Addition
Name: DUNCAN, SHERIKA
Address: 204 S. ORANGE ST.
City-St-Zip: MADISON, FL 32340

Title: D (X) Change () Addition
Name: BROWN, CHINYERE
Address: 913 LINCOLN SQUARE APT. H.
City-St-Zip: ELK GROVE, IL 60007

Title: D (X) Change () Addition
Name: ROBINSON, DENISE L
Address: 301 N.E. BAMBOO TRAIL
City-St-Zip: MADISON, FL 32340

Title: D (X) Change () Addition
Name: THOMAS, TAMEKA
Address: PO BOX 5465
City-St-Zip: TALLAHASSEE, FL 32314

Title: D () Change (X) Addition
Name: MCPHAN, LESLIE F
Address: PO BOX 180517
City-St-Zip: TALLAHASSEE, FL 32303

Title: D () Change (X) Addition
Name: PETERSON, JONATHON F
Address: 4509 DESLIN COURT
City-St-Zip: TALLAHASSEE, FL 32305

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: SHERIKA F. DUNCAN

O/D

09/12/2007

Electronic Signature of Signing Officer or Director

Date