2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000008346

Entity Name: DANCE BROWARD, INC.

FILED Jan 16, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 4602 NW 29 TERRACE TAMARAC, FL 33309 **Current Mailing Address: New Mailing Address:** PO BOX 590382 FT LAUDERDALE, FL 33359 US FEI Number: 26-0781365 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MILLER-ROSINSKI, JENNIFER 4602 NW 29 TERRACE TAMARAC, FL 33309 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete MILLER-ROSINSKI, JENNIFER Name: Name: 4602 NW 29TH TERRACE Address: Address: City-St-Zip: TAMARAC, FL 33309 US City-St-Zip: Title: VPD () Delete Title: () Change () Addition Name: MARKS, SUSAN Name: Address: P.O. BOX 268532 Address: City-St-Zip: WESTON, FL 33326 US City-St-Zip: Title: () Delete Title: () Change () Addition CUTAIA, MARISA Name: Name: 5500 LYONS ROAD, APT. 207 Address: Address: City-St-Zip: COCONUT CREEK, FL 33073 US City-St-Zip: Title: () Delete Title: () Change () Addition Name: MANNING, ANITA Name: 11551 SW 3 ST. Address: Address: City-St-Zip: PLANTATION, FL 33325 US City-St-Zip: Title: () Delete Title: () Change () Addition WALKER, TOM Name: Name: 849 SE 8TH AVENUE Address: Address: City-St-Zip: DEERFIELD BEACH, FL 33441 US City-St-Zip: Title: () Delete Title: () Change () Addition WOLK, JEANNE Name: Name: Address: 2573 JARDIN PLACE Address: WESTON, FL 33327 US City-St-Zip: 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: JENNIFER MILLER-ROSINSKI PD 01/16/2009