2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000003926

Name: CENTRAL FLORIDA DANCE CLUB INC

FILED Apr 23, 2009 Secretary of State

Entity Name: CENTRAL FLORIDA DANCE CLUB, INC.					
Current Principal Place of Business:			New Princi	New Principal Place of Business:	
301 W WARD AVE EUSTIS, FL 32727					
Current Mailing Address:			New Mailir	ng Address:	
PO BOX 323 EUSTIS, FL 32727					
FEI Number: 59-2377755 FEI Number Applied For () FEI Number		I Number Not Appli	cable () Certificate of Status Desired ()		
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
TAYLOR, JOYCE D 15452 SE HWY 42 WEIRSDALE, FL 32195 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:			ADDITION	S/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD ()[BARBER, GLYNN 307 S LAKESHO HOWEY-IN THE	RE BLVD	Title: Name: Address: City-St-Zip:	PD (X) Change () Addition DEWEESE, MYRNA 1573 VICTORIA WAY WINTER GARDEN, FL 34787	
Title: Name: Address: City-St-Zip:	FVPD ()[DEASON, BOBB' 99 PARKLAND D EUSTIS, FL 327	RIVE	Title: Name: Address: City-St-Zip:	FVPD (X) Change () Addition RINAS, PEGGY D 36025 CLEAR LAKE CIRCLE EUSTIS, FL 34789	
Title: Name: Address: City-St-Zip:	TD ()[TAYLOR, JOYCE 15452 SE HWY 4 WEIRSDALE, FL	12	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	1()	Delete	Title: Name: Address: City-St-Zip:	ATD () Change (X) Addition REYNOLDS, HARVEY P O BOX 413 TAVARES, FL 32778	
Title: Name: Address: City-St-Zip:	1()	Delete	Title: Name: Address: City-St-Zip:	VPD () Change (X) Addition LEE, BETTY 19714 SALTSDALE ROAD UMATILLA, FL 32784	
Title: Name: Address: City-St-Zip:]()	Delete	Title: Name: Address: City-St-Zip:	SD () Change (X) Addition SWAYNEIM, NORMA 661 SINCLAIR CIRCLE TAVARES, FL 32778	

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: JOYCE D TAYLOR TD 04/23/2009