

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED  
Aug 14, 2009  
Secretary of State

DOCUMENT# N08000008183

Entity Name: SOUTH BEACH DANCE BOOSTER CLUB, INC.

**Current Principal Place of Business:**

129 N PALMETTO AVE  
DAYTONA BEACH, FL 32114 US

**New Principal Place of Business:**

**Current Mailing Address:**

553 GERTRUDE LANE  
SOUTH DAYTONA, FL 32119 US

**New Mailing Address:**

FEI Number: 27-0736692      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:**

YOUNG, DONALD S JR  
444 SEABREEZE BLVD  
SUITE 625  
DAYTONA BEACH, FL 32118 US

**Name and Address of New Registered Agent:**

YOUNG, DONALD S JR  
4645 S CLYDE MORRIS BLVD  
SUITE 401  
PORT ORANGE, FL 32129 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: DONALD S YOUNG JR

08/14/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: MCCALL, DEBRA  
Address: 129 N PALMETTO AVE  
City-St-Zip: DAYTONA BEACH, FL 32114 US

Title: VP ( ) Delete  
Name: VANCINI, ROBIN  
Address: 129 N PALMETTO AVE  
City-St-Zip: DAYTONA BEACH, FL 32114 US

Title: VP ( ) Delete  
Name: COKER, JEAN  
Address: 129 N PALMETTO AVE  
City-St-Zip: DAYTONA BEACH, FL 32114 US

Title: T ( ) Delete  
Name: PASSAMONTE, MICHLEE  
Address: 129 N PALMETTO AVE  
City-St-Zip: DAYTONA BEACH, FL 32114 US

Title: S ( ) Delete  
Name: RYAN, LORI  
Address: 129 N PALMETTO AVE  
City-St-Zip: DAYTONA BEACH, FL 32114 US

Title: T ( ) Delete  
Name: ALLEN, CINDY  
Address: 129 N PALMETTO AVE  
City-St-Zip: DAYTONA BEACH, FL 32114 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: DEBRA MCCALL

P

08/14/2009

Electronic Signature of Signing Officer or Director

Date