2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2009
Secretary of State

DOCUMENT# N08000009212

Entity Name: SUN COUNTRY DANCE THEATRE, INC.

Current Principal Place of Business:

333 SW 140TH TERRACE
JONESVILLE, FL 32669

New Principal Place of Business:

Current Mailing Address:

333 SW 140TH TERRACE
JONESVILLE, FL 32669

New Mailing Address:

FEI Number: 26-3099162 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RICHARDSON, LAUREN ESQ
1941 NW 23RD TERRACE
GAINESVILLE, FL 32605 US

Name and Address of New Registered Agent:

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: DP ( ) Delete
Name: BOOK, LORI
Address: 333 SW 140TH TERRACE
City-St-Zip: JONESVILLE, FL 32669

Title: DV ( ) Delete
Name: RICHARDSON, LAUREWN
Address: 333 SW 140TH TERRACE
City-St-Zip: JONESVILLE, FL 32669

Title: DS ( ) Delete
Name: SCALES, JAN EWN
Address: 333 SW 140TH TERRACE
City-St-Zip: JONESVILLE, FL 32669

Title: DT ( ) Delete
Name: LUDLOW, JULIE
Address: 333 SW 140TH TERRACE
City-St-Zip: JONESVILLE, FL 32669

Title: D ( ) Delete
Name: BENTON, JUDY
Address: 333 SW 140TH TERRACE
City-St-Zip: JONESVILLE, FL 32669

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:

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: JULIE LUDLOW DT 04/27/2009

Electronic Signature of Signing Officer or Director — Date