

N09000004218

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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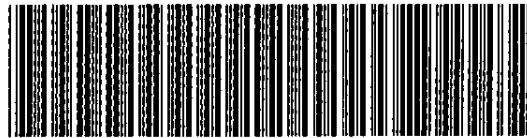
(Business Entity Name)

(Document Number)

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## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Integrity Dance Center, Inc.  
Name of Corporation

**DOCUMENT NUMBER:** N09000004218

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Deborah Bowersox, Treasurer  
Name of Contact Person

Integrity Dance Center, Inc.  
Firm/Company

1013 Long Branch Lane  
Address

Oviedo, FL 32765  
City/State and Zip Code

dsox3@aol.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Deborah Bowersox, Treasurer at ( 407 ) 257-7471  
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH  
FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Integrity Dance Center, Inc.
2. The principal office address: 853 E. SR 434 Suite 1101 Winter Springs, FL 32708
3. The mailing address (if different): 981 Stone Creek Court Longwood, FL 32779
4. Date of incorporation/qualification: April 29, 2009 Document number: N09000004218
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Maria D. Weatherbee

165A Springwood Circle

Longwood, FL 32750

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Maria D. Weatherbee

981 Stone Creek Court

P.O. Box NOT acceptable

Longwood, FL 32779

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The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Deborah A. Bowersox, Treasurer  
Signature of an officer or director

Deborah Bowersox, Treasurer  
Printed or typed name and title

*I hereby accept the appointment as registered agent and agree to act in this capacity, I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.*

Maria D. Weatherbee  
Signature of Registered Agent

September 23, 2011  
Date

If signing on behalf of an entity:

Maria D. Weatherbee  
Typed or Printed Name

**\*\*\* FILING FEE: \$35.00 \*\*\***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314