

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N09000009148

**FILED**  
**Apr 11, 2010**  
**Secretary of State**

**Entity Name:** KEEGAN DANCE PARENT ORGANIZATION, INCORPORATED

**Current Principal Place of Business:**

3550 SOUTH WASHINGTON AVE STE #10  
TITUSVILLE, FL 32780

**New Principal Place of Business:**

1420 WAKEFIELD TERRACE  
TITUSVILLE, FL 32796

**Current Mailing Address:**

3550 SOUTH WASHINGTON AVE STE #10  
TITUSVILLE, FL 32780

**New Mailing Address:**

1420 WAKEFIELD TERRACE  
TITUSVILLE, FL 32796

**FEI Number:** 27-1049961

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CHARRON, MICHELLE  
5741 PEACOCK COURT  
TITUSVILLE, FL 32780 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: P  
Name: PRIDGEN, ASHLEY  
Address: 1420 WAKEFIELD TERRACE  
City-St-Zip: TITUSVILLE, FL 32796

Title: V  
Name: O'BRYAN, JEANNE  
Address: 3605 RANEY ROAD  
City-St-Zip: TITUSVILLE, FL 32780

Title: S  
Name: TAVARES, LINDA  
Address: 2425 VILLAGE LANE  
City-St-Zip: TITUSVILLE, FL 32780

Title: T  
Name: CHARRON, MICHELLE  
Address: 5741 PEACOCK COURT  
City-St-Zip: TITUSVILLE, FL 32780

I hereby 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 all other like empowered.

SIGNATURE: LINDA TAVARES

S

04/11/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date