2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000003027

Entity Name: R.P.M. DANCE, INC.

FILED Apr 14, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

813 FIRST STREET 114 VARIETY TREE CIRCLE

ALTAMONTE SPRINGS, FL 32701 ALTAMONTE SPRINGS, FL 32714

Current Mailing Address: New Mailing Address:

813 FIRST STREET PO BOX 692321

ALTAMONTE SPRINGS, FL 32701 ORLANDO, FL 32869 23

FEI Number: 59-3128029 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

LUNDQUIST, NIKI
813 FIRST ST
ALTAMONTE SPRINGS, FL 32701 US
LUNDQUIST, NIKI
5858 MARLBERRY DR.
ORLANDO, FL 32819 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: 04/14/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS: ADD

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

tle: PTD () Delete Title: PTD (X) Change () Addition

 Name:
 LUNDQUIST, NIKI
 Name:
 LUNDQUIST, NIKI

 Address:
 813 FIRST ST
 Address:
 5858 MARLBERRY DR.

 City-St-Zip:
 ALTAMONTE SPRINGS, FL 32701
 City-St-Zip:
 ORLANDO, FL 32819

Title: SD () Delete Title: SD (X) Change () Addition

 Name:
 MILLER, CHRISTINE
 Name:
 MILLER, CHRISTINE

 Address:
 124 DAKOTA AVE.
 Address:
 12 CRANBERRY WAY

 City-St-Zip:
 GROVELAND, FL 34736
 City-St-Zip:
 MANCHESTER, NH 03019

 $\label{eq:title: VD () Delete Title: VD (X) Change () Addition} \end{minipage}$

 Name:
 MILLER, NATALIE
 Name:
 MILLER, NATALIE

 Address:
 2912 S. SEMORAN BLVD. #1
 Address:
 343 CARDINAL OAKS CT.

 City-St-Zip:
 ORLANDO, FL 32822
 City-St-Zip:
 LAKE MARY, FL 32746

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: NIKI LIN LUNDQUIST PRES 04/14/2009