

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 29, 2002 8:00 am**  
**Secretary of State**

02-24-2002 90059 028 \*\*\*\*70.00

**DOCUMENT # N96000000349**

1. Entity Name

AMERICAN DANCESPORT COMPANY, INC.

Principal Place of Business

Mailing Address

2272 MAIN STREET  
 SARASOTA FL 34237  
 US

2272 MAIN STREET  
 SARASOTA FL 34237  
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0642837

Applied For

Not Applicable

5. Certificate of Status Desired



**\$8.75 Additional  
 Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BARRERA, WILSON  
 1208 S OSPREY AVE  
 SARASOTA FL 34239

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when rehashing)

DATE

**FILE NOW: FEE IS \$61.25  
 8.75**

9. Election Campaign Financing  
 Trust Fund Contribution. ☐

**\$5.00 May Be  
 Added to Fees**

**Make Check Payable to  
 Department of State**

10. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> Delete
NAME	DAY, BARBARA	
STREET ADDRESS	83 TIDY ISLAND BLVD	
CITY-ST-ZIP	BRADENTON FL 34210	D
TITLE	SD	<input checked="" type="checkbox"/> Delete
NAME	GERBER, PHYLLIS	
STREET ADDRESS	48 BAYHEAD LANE	
CITY-ST-ZIP	OSPREY FL 34229	
TITLE	VP	<input type="checkbox"/> Delete
NAME	MOSLEY, SUSAN	
STREET ADDRESS	1748 MANATEE AVENUE W	
CITY-ST-ZIP	BRADENTON FL 34205	D
TITLE	TD	<input type="checkbox"/> Delete
NAME	HEFFERNAN, RANDALL	
STREET ADDRESS	5010 W KENNEDY BLVD	
CITY-ST-ZIP	TAMPA FL 33609	D
TITLE	Director	<input type="checkbox"/> Delete
NAME	Anita G. Hocker	Addition
STREET ADDRESS	2117 Pine Garden Terrace	
CITY-ST-ZIP	SARASOTA, FL 34231	
TITLE	Director	<input type="checkbox"/> Delete
NAME	Beverly Pilot	Addition
STREET ADDRESS	1212 HYVIEW DRIVE	
CITY-ST-ZIP	SARASOTA, FL 34239	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Ingrid Russell	
STREET ADDRESS	4409 Diamond Circle, North	
CITY-ST-ZIP	SARASOTA, FL 34233	
TITLE	Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Melissa Small	
STREET ADDRESS	120 FAUBEL STREET	
CITY-ST-ZIP	SARASOTA, FL 34234	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowerments.

**SIGNATURE: [Signature]**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/06/02

Date Daytime Phone #

CR2E037 (9/01)