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NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N9600005383 (2)

FILED Mar 30 1998 8:00am Secretary of State

Principal Place of Business Maining Address SOUTH MUTARY TRAIL SUST 2.2 BOYNTON BEACH FL 3345 SUST 2.2 BOYNTON BEACH FL 33445 SUST 2.2 BOYNTON BEACH FL 33447 SUST 2.2 BOYNTON BEACH FL 33437 SUST 2.2 BOYNTON BEACH FL 33443 SUST 2.2 BOYNTON BEACH FL 33437 SUST 2.2	L-A DANCE TROUPE PARENTS ASSOCIATION, INC.											
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27	21	···		26							1 5. Certificate of Status Desired L.	
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270 Country Zip Zi				· 								\dashv
Zip Country Zip Country S. This corporation rower has paid the current year Intemplable Personal Property Tax due June 30 Jee No No No No No No No	_				.,							
9. Name and Address of Current Registered Agent ARONSON, CAROLE ESO WEINER AND MORICI, P.A. 102 NORTH SWINTON AVE. DELRAY BEACH FL 33444 144 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florids Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both in the State of Florids. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered office or registered agent, or both in the State of Florids. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered office or registered agent. The State of Florids. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am remains with, and accept the origination of Section 617.050, Florids Statutes. SIGNATURE PD		Cou	ntry	+ · · ·			ountry				7	
ARONSON, CAROLE ESO WENER AND MORICI, P.A. 102 NORTH SWINTON AVE. DELRAY BEACH FL 33444 11. Pursuant to the provisions of Sections 517 0502 and 617-1598, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of. Sections 617 0503. Florida Statutes. SIGNATURE BOTH Registered Statutes Port Registered Statutes Port Registered sperit am familiar with, and accept the obligations of. Section 617 0503. Florida Statutes corporation's board of directors. I thereby accept the appointment as registered agent am familiar with, and accept the obligations of. Section 617 0503. Florida Statutes	24						30				Personal Property Tax due June 30. 🔲 Yes 📈 No	_
ARONSON, CAROLE ESO WEINER AND MORICI, P.A. 102 NORTH SWINTON AVE DELRAY BEACH FL 33444 11. Pursuant to the provisions of Sections 617,0502 and 617,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Fioridas Such change was authorized by the corporation's board of directors. I heraby accept the appointment as registered agent, and make agent and the 1 secticals SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE PD BARTH, KATHLEEN SOSS BRAIN BLVD. BOYNTON BEACH FL 33437 TITLE PPD DELETE 1.1 TITLE PPD DELETE 2.1 TITLE PPD DELETE 2.1 TITLE PPD DELETE 2.1 TITLE PPD DELETE 3.1 SWEET ADDRESS CMY-ST-2P BOYNTON BEACH FL 33463 DELETE 3.2 NAME 3.3 SWEET ADDRESS CMY-ST-2P BOYNTON BEACH FL 33463 DELETE 3.3 SWEET ADDRESS CMY-ST-2P BOYNTON BEACH FL 33463 DELETE 3.3 SWEET ADDRESS CMY-ST-2P BOYNTON BEACH FL 33463 DELETE 3.3 SWEET ADDRESS CMY-ST-2P BOYNTON BEACH FL 33463 DELETE 3.3 SWEET ADDRESS CMY-ST-2P BOYNTON BEACH FL 33463 DELETE 3.3 SWEET ADDRESS CMY-ST-2P TITLE TITLE DELETE 3.1 TITLE DELETE 3.1 TITLE DELETE 3.3 SWEET ADDRESS CMY-ST-2P TITLE DELETE 3.3 SWEET ADDRESS 3.4 CMY-ST-2P TITLE DELETE 3.5 TIT		9. Name and Add	Ireas of Current R	egister	ed Ager	ıt					10. Name and Address of New Registered Agent	7
WEINER AND MORICI, P.A. 102 NORTH SWINTON AVE. DELRAY BEACH FL 33444 84								81	Name			
102 NORTH SWINTON AVE. DELRAY BEACH FL 33444 11. Pursuant to the privisions of Soctions 617,0502 and 617,1508, Florida Statules, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered office or registered agent, or registered when retretaining. DATE 12. OFFICERS AND DIRECTORS IN 12 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ITIE PD OFFICERS AND DIRECTORS IN 12 12. MME SIREET ADDRESS SIREET ADDRESS SIREET ADDRESS SIREET ADDRESS OLD MEDINAH CIR. 22 NAME SAROLSAM 32 NAME SAROLSAM 32 NAME SAROLSAM 32 NAME SIREET ADDRESS OLTY-ST-2P SOUTHON BEACH FL 33483 OCHANGE AGAISM SIREET ADDRESS OLTY-ST-2P SOUTH FL 33463 OCHANGE AGAISM OCHANGE AGA						₹			Street	Addres	iss (P.O. Box Number is Not Acceptable)	7
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11. Pursuant to the provisions of Sections 617, 0502 and 617, 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the solidations of, Section 617,0503, Florida Statutes. SIGNATURE	DELRAY	BEACH FL 33444						84	City		85 Zip Code	\dashv
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SIGNATURE Signature typed or primed name of replacemed agent and the if applicable NOTE Replacemed required when retrainting) DATE	The Pursuant to the provisions of Sections 617.0502 and 617.0508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered											
Signature, typed or printed hamped registered agent and title flagplectable (NoTE: Registered Agent stynature required when retreating) DATE	agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.											
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	14. I hereby o	ertify that the informa	tion supplied with	this filing	does r	ot qualify for				ed in S	Section 119.07(3)(i), Florida Statutes. I further certify that the information	,

indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under cath; 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

drap halm

DYAN HANK INS

3/18/98

561-433-8264