

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 05, 2001 8:00 am
Secretary of State

0052484

DOCUMENT # N96000005383

1. Entity Name

L-A DANCE TROUPE PARENTS ASSOCIATION, INC.

03-05-2001 90351 042 *****70.00

Principal Place of Business

**9816 SOUTH MILITARY TRAIL
 SUITE 2-2
 BOYNTON BEACH FL 33436**

Mailing Address

**9816 SOUTH MILITARY TRAIL
 SUITE 2-2
 BOYNTON BEACH FL 33436**

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

65-0701730

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

**ARONSON, CAROLE ESQ
 WEINER AND MORICI, P.A.
 102 NORTH SWINTON AVE.
 DELRAY BEACH FL 33444**

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 reinstating)

DATE

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

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD
 NAME MARKS, DOUGLAS ☐ Delete
 STREET ADDRESS 6297 COUNTRY FAIR CIR.
 CITY-ST-ZIP BOYNTON BEACH FL 33437

TITLE VPD
 NAME GRAUSAM, RONALD L. ☐ Change ☒ Addition
 STREET ADDRESS 6380 Old Medinah Cir.
 CITY-ST-ZIP Lake Worth, FL 33463

TITLE VPD
 NAME GRADY, JAMES ☒ Delete
 STREET ADDRESS 3975 DORRIT AVE.
 CITY-ST-ZIP BOYNTON BEACH FL 33436

TITLE SD
 NAME DELLINGER, Sharon ☐ Change ☒ Addition
 STREET ADDRESS 7656 Thornlee Dr.
 CITY-ST-ZIP Lake Worth, FL 33464

TITLE SD
 NAME GRADY, SHERRI ☒ Delete
 STREET ADDRESS 3975 DORRIT AVE.
 CITY-ST-ZIP BOYNTON BEACH FL 33436

TITLE T/O
 NAME MENDEL, RUTH ANN ☐ Change ☒ Addition
 STREET ADDRESS 1041 CORAL DR.
 CITY-ST-ZIP BOYNTON BEACH, FL 33426

TITLE TD
 NAME VENEZIA, NANCY ☒ Delete
 STREET ADDRESS PO BOX 3104
 CITY-ST-ZIP BOYNTON BEACH FL 33424

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ 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 empowered.

SIGNATURE: RONALD L. GRAUSAM 3/3/01 561-732-6237
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (10/00)