2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Jul 14, 2004 8:00 am Secretary of State

DOCUMENT # N9600005575 1. Entity Name PEGGY BROWN'S ENCORE DANCE COMPANY				RA I	ary of State 90006 021 ****61.25	
Principal Plac 11260 FORT J-1	TUNE CIRCLE	Mailing Address 11260 FORTUNE CIRCL J-1				
WELLINGTON, FL 33414 WELLINGTON, FL 33414			14			
2. Principal Place of Business		3. Mailing Address				
Suite, Apt. #, etc.		Suite, Apt. #, etc.		07112004 Chg-NP	CR2E037 (10/03)	
City & State		City & State		4. FEI Number 65-1016630	Applied For Not Applicable	
Zip	Country	Zip	Country	5. Certificate of Status Desired	S8.75 Additional Fee Required	
	6. Name and Address of Current	Registered Agent	Name	7. Name and Address of New F	Registered Agent	
BROWN, PEGGY 11260 FORTUNE CIRCLE, J-1 WELLINGTON, FL 33414			Street Addre	Street Address (P.O. Box Number is Not Acceptable)		
	1		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. I am familiar with, and accept the obligations of registered agent.						
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE						
Filing Fee is \$61.25 Due by September 8, 2004 9. Election Campaign Financing \$5.00 May Be Added to Fees Florida Department of State						
10.	OFFICERS AND DI		11.	ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	BROWN, PEGGY 11260 FORTUNE CIRCLE, J-1 WELLINGTON, FL 33414	☐ Defete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS	D BROWN, BRANTLEY T 11260 FORTUNE CIRCLE, J-1	☐ Delete	TITLE NAME STREET ADDRESS		☐ Change ☐ Addition	
CITY-ST-ZIP	WELLINGTON, FL 33414	. Delete	CITY-ST-ZIP		☐ Change ☐ Addition	
NAME STREET ADDRESS CITY-ST-ZIP	HEBRON, EILEEN 11260 FORTUNE CIRCLE J-1 WEST, PALM BEACH, FL 33414		NAME STREET ADDRESS CITY-ST-ZIP		٠.	
TITLE NAME		☐ Detete	TITLENAME		☐ Change ☐ Addition	
STREET ADDRESS City-St-Zip	i		STREET ADDRESS CITY-ST-ZIP	Commence of the second sec	المهدان والتاه والمناه والمناه والمناهد والمناهد والمناهد المناه المناهد المنا	
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TITLE NAME STREET ADDRESS		☐ Delete	CITY-ST-ZIP TITLE NAME STREET ADDRESS		☐ Change ☐ Addition	
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: 3 SIGNATURE AND TYPED OF FIRM ED PAGE OF SIGNING OFFICER OR DIRECTOR DEID DEID DEVICE DE DEVICE						