

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N98000003856

1. Entity Name

SUPPORT DANCE, INC.

Principal Place of Business

8157-D ANDOVER CT
LAKE CLARKE SHORES FL 33406

Mailing Address

8157-D ANDOVER CT
LAKE CLARKE SHORES FL 33406

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

65-0854931

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

Name

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

City

FL

Zip Code

BROCK, BETH ANNE
8157-D ANDOVER CT
LAKE CLARKE SHORES FL 33406

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 ☐ Delete
NAME BRAND PETERS, CATHY
STREET ADDRESS 449 PALO ALTO
CITY-ST-ZIP PALM SPRINGS FL 33461

TITLE PD ☒ Change ☐ Addition
NAME EASTON, MARK
STREET ADDRESS 1314 LAKE GENEVA DRIVE
CITY-ST-ZIP LAKE WORTH, FL 33461

TITLE VD ☐ Delete
NAME MIESZEZENSKI, PAY BOYD
STREET ADDRESS 2861 MEADOW RD
CITY-ST-ZIP WEST PALM BEACH FL 33406

TITLE VD ☒ Change ☐ Addition
NAME GEORGE, FIFI
STREET ADDRESS 170 YALE DRIVE
CITY-ST-ZIP LAKE WORTH, FL 33460

TITLE SD ☐ Delete
NAME GIVENS, CRAIG
STREET ADDRESS 724 N STREET
CITY-ST-ZIP WEST PALM BEACH FL 33401

TITLE D ☐ Change ☒ Addition
NAME CULBERT, RYAN
STREET ADDRESS 16319 E. BURNS DRIVE
CITY-ST-ZIP LOXAHATCHEE, FL 33470

TITLE TD ☐ Delete
NAME BROCK, BETH ANNE
STREET ADDRESS 8157-D ANDOVER CT
CITY-ST-ZIP LAKE CLARKE SHORES FL 33406

TITLE D ☐ Change ☒ Addition
NAME PLANK, HOLLY
STREET ADDRESS 51 CLEVELAND ROAD
CITY-ST-ZIP LAKE WORTH, FL 33467

TITLE D ☐ Delete
NAME EASTON, MARK
STREET ADDRESS 1314 LAKE GENEVA DR
CITY-ST-ZIP LAKE WORTH FL 33461

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

TITLE D ☐ Delete
NAME GEORGE, FIFI
STREET ADDRESS 170 YALE DR
CITY-ST-ZIP LAKE WORTH FL 33460

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: *Beth Anne Brock*

5-1-2001 561-832-1626

CR2E037 (10/00)