NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # N9800005845

1. Corporation Name

DANCE OCALA, INC.

Principal Place of Business 1601 NE. 25TH AVENUE STE. 706 OCALA FL 34470

Mailing Address

1105 N.E. 46TH CT. OCALA FL 34470

FILED Mar 08, 1999 8:00 am Secretary of State

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2. Principal	Place of Business	2a. Mailing Address			3. Date Incorporate	d or Qualifed		
21		26			10/07/1998			
Suite, Ap	t. #, etc.	Suite, Apt. #. etc.			4. FEI Number	0000	\vdash	Applied For
22		27			59-329	2029		Not Applicable
City & St	ate	City & State	· -		5. Certificate of State	tus Desired 💢		5 Additional Regulard
23	Country	Zip	Country		6. Efection Campai	on Financina	C 5	00 May Be
Zip 24	Country	29	30		Trust Fund Cont			sed to Fees
24	9. Name and Address of Currer	<u> </u>	[30]		10. Name and Addi			
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FELTS, JANET			82	82 Street Address (P.O. Box Number is Not Acceptable)				
	43RD AVE.		83					
UCALA	FL 34471							7la Cada
			84	City			FL 85	Zip Code
11 Director	nt to the provisions of Sections 617.050	12 and 617 1508 Florida Stal	tutes, the above	e-named ∝	progration submits this state	tement for the purpo	see of changing	g its registered
office c	nt to the provisions of Sections 617.050 r registered agent, or both, in the State am familiar with, and accept the obliga	of Florida. Such change was	authorized by	the corpora	ation's board of directors.	hereby accept the	appointment a	s registered
agent. I	am familiar with, and accept the obliga	ations of, Section 617.0503, F	-ionda Statutes	.				ļ
SIGNATURI	E	or and the H contaction (Sec.	TC: Danistered Acen	d almost are seen	aired when reinstating)		NTE .	
12.	Signature, typed or printed name of registered age	ND DIRECTORS	13.	- Autorities Ladie		NGES TO OFFICE		CTORS IN 12
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Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. Intuitier certify that the indicated on this annual report or suppliemental annual report is true and securate 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 12 or Block 13 if changed, on an attachment with an address, with all other like empowered.

SIGNATURE:

352.622-8547