


# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 03, 2005 08:00 AM**  
**Secretary of State**

DOCUMENT # N99000003206 1. Entity Name JUNIOR DANCE SPORT USA INC.	
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Principal Place of Business 12520 OAK ARBOR LANE BOYNTON BEACH, FL 33436	Mailing Address 12520 OAK ARBOR LANE BOYNTON BEACH, FL 33436
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DO NOT WRITE IN THIS SPACE



01262005 No Chg-NP CR2E037 (10/03)

4. FEI Number 65-0935549	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

5. Name and Address of Current Registered Agent

MALONEY, CATIA  
12520 OAK ARBOR LANE  
BOYNTON BEACH, FL 33436

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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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

Filing Fee is \$61.25 Due by May 1, 2005	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P BOE, ASHLEY 12520 OAK ARBOR LN BOYNTON BEACH, FL 33436
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP FLETCHER, TIKI 5730 GRAND RESERVE WAY NAPLES, FL 34110
TITLE NAME STREET ADDRESS CITY - ST - ZIP	ST MILLER, BRAD 1174 NW 13ST 224-B BOCA RATON, FL 33486
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D AQUILANO, DEBRA 701 E CAMINO REAL PALM BEACH, FL 33480
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D FLINGOS, KELLY 1710 STONEHAVEN DR 1 BOCA RATON, FL 33486
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D GOUVERT, DELORES 660 W LINTON BLVD 202 DELRAY BEACH, FL 33444

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02/03/05-80071-018 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: *Catia Maloney* Reg Agent 1-21-05 561 272-0000  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #