## **2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)**

## DOCUMENT # N9900006263

1. Entity Name

THE POUTLITES SK. DANCE THOUPE, INC.								
783 NE DIXIE HWY 78		Mailing . 783 NE D JENSEN E						
2. Principal Place of Business		3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.				HECK HERE IF MAKIN	IG CHANGES	<b>:</b>
City & State		City & State						
		<u> </u>			4. FEI Number 65-0948440         Applied For Not Applicable			
Zip ;	Country	Zip		Country	5. Certificate of Stat	us Desired	\$8.75 Ad Fee Require	
	6. Name and Address of Currer	nt Registered	Agent	~	7. Name and Addre	ss of New Registered	•	
PINKNEY, PADRICK A				Name				
145 NW	<b>CENTRAL PARK PLAZA STE 200</b>			Street Addres	s (P.O. Box Number is No	t Acceptable)		
PT ST LI	JCIE FL 34952					<b>4</b>		
				City	* 1	F	Zip Coc	le
8. The above	e named entity submits this statement	for the purpose	of changing its r	egistered office or regist	tered agent, or both, in th	e State of Florida. I an	n familiar with,	and accept
the obliga	tions of registered agent.							
SIGNATURE								
	Signature, typed or printed name of registered age	nt and title if applica	ole. (NOTE:	Registered Agent signature requi	ired when reinstating)	DATE		
	FILE NOW: FEE IS \$61.25		9. Election Cam Trust Fund Co	· · · -	\$5.00 May Be Added to Fees  Make Check Payable to Florida Department of State			
10.	OFFICERS AND D	IRECTORS		11.	ADDITIONS/CHANGES	TO OFFICERS AND D	IRECTORS IN	Ī 10
TITLE	PD TANGO, MILDRED		☐ Delete	TITLE			☐ Change	Addition
NAME Street address	783 NE DIXIE HWY			NAME STREET ADDRESS				
CITY-ST-ZIP	JENSEN BEACH FL 34957			CITY-ST-ZIP				
TITLE	TD		☐ Delete	TITLE		<u>, .</u>	Change	Addition
NAME Street address	THOMPSON, VIRGINIA 783 NE DIXIE HWY			NAME STREET ADDRESS				
CITY-ST-ZIP	JENSEN BEACH FL 34957			CITY-ST-ZIP				
TITLE	SD		☐ Delete	TITLE		····	☐ Change	Addition
NAME	FRIEDMAN, LILA			NAME				_
STREET ADDRESS CITY-ST-ZIP	783 NE DIXIE HWY JENSEN BEACH FL 34957			STREET ADDRESS CITY-ST-ZIP				
DITLE	D DENOEN BEACH FL 34937	**	☐ Delete	TITLE			Change	Addition
IAME	COTHRON, FRAN		→ Delet	NAME			□ change	Addition
STREET ADDRESS	783 NE DIXIE HWY			STREET ADDRESS				
OTY-ST-ZIP	JENSEN BEACH FL 34957			CITY-ST-ZIP	<del></del>			····
TTLE IAME	TARALLO, CAROL		☐ Delete	TITLE NAME			☐ Change	Addition
TREET ADDRESS	783 NE DIXIE HWY			STREET ADDRESS				
CITY-ST-ZIP	JENSEN BEACH FL 34957	•		CITY-ST-ZIP				
ITLE	TD		☐ Delete	TITLE	-		☐ Change	Addition
IAME	Jones, Elizabeth K			NAME				

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.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS 783 NE DIXIE HWY

RIO- JENSEN BEACH FL 34957

772-232-0504

**FILED** 

Jan 10, 2003 8:00 am Secretary of State

01-10-2003 90080 048 \*\*\*\*70.00