2007 FOR PROFIT CORPORATION

FILED Apr 25, 2007 08:00 A Secretary of State

ANNUAL REPORT					Apr 25, 2007 08: Secretary of St			
DOCUMENT # P02000066423 1. Entity Name DANCING DRAGONFLYS, INC.					Se	ecreta	ry of S	
DANCIN	G DRAGONFLYS, INC.							
	ce of Business	Mailing Address						
226A BEACH ST 3 OCEANS W BLVD 1-D-5 Daytona Beach, Fl. 32114 Daytona BCH Shores, Fl. 3			2118	}				
				1 13 251 2 2	 	KIR GUIR BIIN SIGN	1330 (111 66) (1 126)	
				04182007	No Chg-P	CR2E034 (11	(05)	
DO NOT WRITE IN THIS SPA			CE	4. FEI Num		1	Applied For	
				£.08	89477	\$8.75	Not Applicable Additional	
				5. Certifica	te of Status Desired	Fee Re		
	6. Name and Address of Current Rep	listered Agent						
MITCHELL, JEROME D ESQUIRE				no	NOT WR	ITE		
RIGGIO & MITCHELL, P.A. 400 S PALMETTO AVE				a 368 a 680		NA ALOGERIA EL SEC		
DAYTONA BCH, FL 32114				IN	THIS SPA	(CE		
8. The above the obligat	e named entity submits this statement for the tions of registered agent.	purpose of changing its register	ed office or re	gistered agent, or b	ooth, in the State of Florida	a. I am familiar	with, and accept	
SIGNATURE.	• • •							
JIGNATORE.	Signature, typed or printed name of registered agent and t	tie if applicable. (NOTE: Registere	d Agent agnature	required when remembing)		DATE		
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Fina Trust Fund Contribution			ncing	\$5.00 May Be Added to Fees	U0000073 05/08/07-80	1116	150.00	
10.	OFFICERS AND DIR	ECTORS	THE THE		1 337 Horri - Ol		1.00 a 00 -0.00 00 0 -00 00 -0.00 0 -0.00 0	
title Name	DPS BRADSHER, KAREN							
STREET ADDRESS	<u>'</u>							
CITY-ST-ZIP	DAYTONA BCH SHORES, FL 3211	8						
TITLE NAME	DVT BRADSHER, GLENN							
STREET ADDRESS	3 OCENAS W. BLVD 1-D-5							
CITY-ST-ZIP	DAYTONA BEACH, FL 32118						manan man was Malawa Malawa	
TITLE								
NAME Street address			NS 2002 (1.30%)					
CITY-ST-ZIP				Do	NOT WR	ITE		
TITLE				IN	THIS SPA	CE		
NAME Street address					W 1960-000 O - 000 1 - 004-460 N 99 5666	AND THE RESERVE OF THE PARTY OF		
CITY-ST-ZIP				(5.1.400000000000000000000000000000000000	00000000000000000000000000000000000000			
TITLE			.00000000000000000000000000000000000000	ech moorgon benn moorgovach soorgo		Quitti 1.12/2000 (1.76/00/00/00		
NAME STREET ADDRESS								

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all piner like empowered.

SIGNATURE:

CITY-ST-ZIP

TITLE
NAME
STHEET ADDRESS
CITY-ST-ZIP

MONATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/23/07 (386) 239-014