## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000074353

Entity Name: EXPRESSIONS ACADEMY OF DANCE, INC.

FILED Apr 30, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

7501 SEMINOLE BLVD 9199 PARK BLVD SEMINOLE, FL 33772 SEMINOLE, FL 33777

Current Mailing Address: New Mailing Address:

7501 SEMINOLE BLVD 9199 PARK BLVD SEMINOLE, FL 33772 SEMINOLE, FL 33777

FEI Number: 20-0104603 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

NARZINSKY, LARA
7501 SEMINOLE BLVD
SEMINOLE, FL 33772 US
NARZINSKY, LARA
9199 PARK BLVD
SEMINOLE, FL 33777

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: LARA NARZINSKY 04/30/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title: DV (X) Change ( ) Addition

US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 DV
 ( ) Delete
 Title:
 DV
 ( X) Change ( ) Addition

 Name:
 STOUT, ANDREA
 Name:
 STOUT, ANDREA

 Address:
 7501 SEMINOLE BLVD.
 Address:
 9199 PARK BLVD

 City-St-Zip:
 SEMINOLE, FL 33777 US
 SEMINOLE, FL 33777 US

Title: DPTS ( ) Delete Title: DPTS (X) Change ( ) Addition

 Name:
 NARZINSKY, LARA
 Name:
 NARZINSKY, LARA

 Address:
 7501 SEMINOLE BLVD
 Address:
 9199 PARK BLVD

 City-St-Zip:
 SEMINOLE, FL 33772 US
 City-St-Zip:
 SEMINOLE, FL 33777 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANDREA STOUT D 04/30/2008