## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P07000088429

Entity Name: CHANDELLE'S DANCE WEAR ,INC.

FILED Jan 14, 2008 Secretary of State

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

96537 PARLIAMENT DRIVE SUITE C 702 B MISSION TRACE DRIVE FERNANDINA BEACH, FL 32034 US ST MARYS, GA 315583796 US

Current Mailing Address: New Mailing Address:

37707 HENRY SMITH ROAD
HILLIARD, FL 32046 US

37707 HENRY SMITH ROAD
HILLIARD, FL 320468423 US

FEI Number: 26-0666072 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:

AMERICAN SAFETY COUNCIL, INC.

5125 ADANSON ST. SUITE 500

ORLANDO, FL 32804 US

MENZELLA, BARBARA A
37707 HENRY SMITH ROAD
HILLIARD, FL 320468423 US

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: BARBARA A, MENZELLA 01/14/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

 Title:
 PSTD () Delete

 Name:
 MENZELLA, BARBARA

 Address:
 37707 HENRY SMITH ROAD

 City-St-Zip:
 HILLIARD, FL 32046 US

 Title:
 VP
 ( ) Delete

 Name:
 MENZELLA, MICHELLE

 Address:
 37707 HENRY SMITH ROAD

 City-St-Zip:
 HILLIARD, FL 32046 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPST (X) Change ( ) Addition
Name: MENZELLA, BARBARA
Address: 37707 HENRY SMITH ROAD
City-St-Zip: HILLIARD, FL 320468423 US

Title: VP (X) Change ( ) Addition

Name: MENZELLA, MICHELLE
Address: 37707 HENRY SMITH ROAD
City-St-Zip: HILLIARD, FL 320468423 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: BARBARA A. MENZELLA DPST 01/14/2008