2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2009
Secretary of State

DOCUMENT# P96000034282

Entity Name: DANCING BEAR GROUP, INC.

Current Principal Place of Business:

110 E. BROWARD BLVD.
10TH FLOOR
FT. LAUDERDALE, FL 33301 US

New Principal Place of Business:

Current Mailing Address:

110 E. BROWARD BLVD.
10TH FLOOR
FT. LAUDERDALE, FL 33301 US

New Mailing Address:

FEI Number: 65-0660648 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SMITH, DENNIS D
110 S.E. 6TH ST.
28TH FLOOR
FT. LAUDERDALE, FL 33301 US

Name and Address of New Registered Agent:

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: _____
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title:	D	( ) Delete
Name:	EGAN, MICHAEL S CEO	
Address:	110 E. BROWARD BLVD	
City-St-Zip:	FT. LAUDERDALE, FL 33301	
Title:	DT	( ) Delete
Name:	LEBOWITZ, ROBIN S	
Address:	110 EST BROWARD BLVD	
City-St-Zip:	FT LAUDERDALE, FL 33301	
Title:	D	( ) Delete
Name:	KELLY, WILLIAM H JR	
Address:	55 E. MONROE ST. #4620	
City-St-Zip:	CHICAGO, IL 60603	
Title:	S	( ) Delete
Name:	TRIPP, NORMAN D.	
Address:	110 SE 6TH STREET	
City-St-Zip:	FT. LAUDERDALE, FL	
Title:	VP	( ) Delete
Name:	DAVISON, NICHOLAS	
Address:	110 E. BROWARD BLVD.	
City-St-Zip:	FORT LAUDERDALE, FL 33301	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

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: ROBIN S LEBOWITZ DT 04/17/2009
Electronic Signature of Signing Officer or Director Date