

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED  
Apr 23, 2008  
Secretary of State

DOCUMENT# N01000007509

Entity Name: DANCE REVOLUTION, INC.

**Current Principal Place of Business:**

1936 BRUCE B DOWNS BLVD.  
#328  
WESLEY CHAPEL, FL 33543

**New Principal Place of Business:**

**Current Mailing Address:**

1936 BRUCE B DOWNS BLVD.  
#328  
WESLEY CHAPEL, FL 33543

**New Mailing Address:**

FEI Number: 59-3757378      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

BROGAN, WILLIAM  
1936 BRUCE B DOWNS BLVD  
#328  
WESLEY CHAPEL, FL 33543 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

**OFFICERS AND DIRECTORS:**

Title: PRES ( ) Delete  
Name: BROGAN, MICHELLE L  
Address: 27003 FIREBUSH DR  
City-St-Zip: WESLEY CHAPEL, FL 33543

Title: VP ( ) Delete  
Name: BROGAN, WILLIAM A  
Address: 27003 FIREBUSH DR  
City-St-Zip: WESLEY CHAPEL, FL 33543

Title: TRES ( ) Delete  
Name: MORATIN, EDWARD A  
Address: 420 LEXINGDALE DR  
City-St-Zip: ORLANDO, FL 32828

Title: SEC ( ) Delete  
Name: MOREAU, SUZANNE  
Address: 211 ROCK PRARIE RD  
City-St-Zip: COLLEGE STATION, TX 77845

Title: D ( ) Delete  
Name: GEORGE, J. SCOTT  
Address: 7540 GRAND AVE  
City-St-Zip: WINTER PARK, FL 32746

**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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHELLE L BROGAN

PRES

04/23/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date