2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 08, 2000 8:00 am
Secretary of State
06-08-2000 90017 022 ****61.25

DOCUMENT # 737118

1. Entity Name

GREATER JACKSONVILLE GYMNASTICS BOOSTER CLUB, IN

Principal Place of Business	Mailing Address
730 ST. JOHNS BLUFF RD. N. JACKSONVILLE FL 32225-6770	730 ST. JOHNS BLUFF RD. N. JACKSONVILLE FL 32225-6770

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-1693979 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

PULSIDER, KELLY
3674 BUCKSKIN TRL W
JACKSONVILLE FL 32225

7. Name and Address of New Registered Agent

Name: MISTY WILLIAMS
Street Address (P.O. Box Number is Not Acceptable): 1103 2ND AVE N
City: JACKSONVILLE BEACH FL Zip Code: 32250

8. 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: Misty Williams, PRESIDENT 4-19-00
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D VOSS, ROBIN STRATTON RD. CALLAHAN FL	☒ Delete	DV MONTANYE, MOLLY 567 CLIPPERSHIP LANE ATLANTIC BEACH, FL 32233	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD PULSIFER, KELLY 3674 BUCKSKIN TRAIL JACKSONVILLE FL	☒ Delete	DS GREENE, TERRY 13898 SOFT WIND TRAIL N. JACKSONVILLE, FL 32226	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD WILLIAMS, MISTY 1103 2ND AVE N JACKSONVILLE FL 32250	☐ Delete	P	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DS GRAY, DARLENE 1875 MAUVA JUAN AVE JACKSONVILLE FL	☒ Delete	D LUDWIG, SUZY 6830 OAKWOOD DRIVE JACKSONVILLE, FL 32211	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D OLGA, LINDO 2514 TEMPO LANE JACKSONVILLE FL	☒ Delete	D LAURICELLA, ANDREA 1687 PONDEROSA PINE DRIVE W. JACKSONVILLE, FL 32225	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

CR2E067 (9/99)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED Misty Williams 4-19-00 904-348-5057
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #