2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 18, 2006
Secretary of State

DOCUMENT# 737118

Entity Name: GREATER JACKSONVILLE GYMNASTICS BOOSTER CLUB, INC.

Current Principal Place of Business:

730 ST. JOHNS BLUFF RD. N.
JACKSONVILLE, FL 322256770

New Principal Place of Business:

Current Mailing Address:

730 ST. JOHNS BLUFF RD. N.
JACKSONVILLE, FL 322256770

New Mailing Address:

FEI Number: 59-1693979 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

CLINGAN, CASEYANNE TREASUR
14019 BEACH BLVD.
1047
JACKSONVILLE, FL 32250 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:	T	( ) Delete
Name:	CLINGAN, CASEYANNE T	
Address:	14019 BEACH BLVD. #1047	
City-St-Zip:	JACKSONVILLE, FL 32250	
Title:	S	(X) Delete
Name:	BUNNEWITH, DENISE	
Address:	1696 PONDEROSA PINE DR W	
City-St-Zip:	JACKSONVILLE, FL 32225	
Title:	P	(X) Delete
Name:	KOVACS, TRACEY	
Address:	12435 APPLE LEAF DR.	
City-St-Zip:	JACKSONVILLE, FL 32224	

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:	

I hereby certify that the information supplied with this filing does not qualify for the 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: CASEYANNE CLINGAN T 08/18/2006
Electronic Signature of Signing Officer or Director — Date