

FILED
Apr 04, 2003 8:00 am
Secretary of State

01-30-2003 90112 042 ****61.25

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # 755765

1. Entity Name

THE PENSACOLA GYMNASICS BOOSTERS, INCORPORATED



Principal Place of Business

1000 COLLEGE BLVD.
BUILDING #19
PENSACOLA FL 32504

Mailing Address

C/O TRISTY COREY
6725 CHICAGO AVE
PENSACOLA FL 32528
US

Same as
place of
business

1000 College Blvd.
Building # 19
Pensacola FL 32504



2. Principal Place of Business

3. Mailing Address

☐ CHECK HERE IF MAKING CHANGES

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 50-2385739

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

~~TRISTY COREY~~ Julie Snyder
6725 CHICAGO AVE 2011 Morningside Dr.
PENSACOLA FL 32504 32503

Name Julie Snyder
Street Address (P.O. Box Number is Not Acceptable)
2011 Morningside Dr.
City Pensacola FL Zip Code 32503

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reappointing)

DATE

FILE NOW: FEE IS \$81.25

9. Election Campaign Financing
Trust Fund Contribution.

☐ \$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE T
NAME COREY, TRISTY
STREET ADDRESS 6725 CHICAGO AVE
CITY-ST-ZIP PENSACOLA FL 32528 ☒ Delete

TITLE T
NAME Julie Snyder, Treasurer
STREET ADDRESS 2011 Morningside Dr.
CITY-ST-ZIP Pensacola, FL 32503 ☒ Change ☒ Addition

TITLE D
NAME PICKERING, LEANNE
STREET ADDRESS 1000 COLLEGE BLVD.
CITY-ST-ZIP PENSACOLA FL 32504 ☐ Delete

TITLE D
NAME LeAnne Pickering D S
STREET ADDRESS 1000 College Blvd.
CITY-ST-ZIP Pensacola FL 32504 ☐ Change ☐ Addition

TITLE PD
NAME PRIEFER, JODI
STREET ADDRESS 10700 GULF BREEZE HWY
CITY-ST-ZIP PENSACOLA FL 32507 ☐ Delete

TITLE P
NAME President
NAME Steve Van Gogh
STREET ADDRESS 9041 Woodrun Rd. E
CITY-ST-ZIP Pensacola, FL 32514 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
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STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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:

Julie Snyder, Treasurer

1-22-03

(850) 436-8419

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone