2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000002960

FILED Jan 03, 2006 Secretary of State

Entity Name: BAYSIDE GYMNASTICS BOOSTER CLUB, INC.

Current Principal Place of Business: New Principal Place of Business:

4400 118TH AVE., SUITE 103 CLEARWATER, FL 33762

Current Mailing Address: New Mailing Address:

4400 118TH AVE., SUITE 103 CLEARWATER, FL 33762

FEI Number: 59-3643391 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

MCGINN, MARY A

7225 BRYCE PT

6045 96TH TERRACE

PINELLA C PARK FL 22702

PINELLAS PARK, FL 33782 US PINELLAS PARK, FL 33782 US

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: LAURA W GRECO 01/03/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: PD () Delete Title: P/D (X) Change () Addition

 Name:
 WEST, BRENDA M
 Name:
 PAXSON, ALISON

 Address:
 5000 47TH AVE N
 Address:
 1860 70TH CIRCLE N

City-St-Zip: SAINT PETERSBURG, FL 33709 US City-St-Zip: SAINT PETERSBURG, FL 33702 US

Title: T/D () Delete Title: T/D (X) Change () Addition Name: MCGINN, MARY A Name: GRECO, LAURA W

 Address:
 7225 BRYCE PT
 Address:
 6045 96TH TERRACE

 City-St-Zip:
 PINELLAS PARK, FL 33782 US
 City-St-Zip:
 PINELLAS PARK, FL 33782

Title: S/D () Delete Title: S/D (X) Change () Addition
Name: LEARY, KELLY Name: GRANBY, SUSAN L

Address: 5425 63RD WAY N Address: 6665 68TH ST

City-St-Zip: SAINT PETERSBURG, FL 33709 US City-St-Zip: PINELLAS PARK, FL 33781

Title: VD (X) Delete Title: () Change () Addition

 Name:
 PAXSON, ALISON
 Name:

 Address:
 1860 70TH CIRCLE N
 Address:

 City-St-Zip:
 ST PETERSBURG, FL 33702 US
 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: LAURA W GRECO T/D 01/03/2006