

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000002960

FILED
Jan 17, 2008
Secretary of State

Entity Name: BAYSIDE GYMNASTICS BOOSTER CLUB, INC.

Current Principal Place of Business:

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

New Principal Place of Business:

Current Mailing Address:

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

New Mailing Address:

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

Name and Address of Current Registered Agent:

GRECO, LAURA W
6045 96TH TERRACE
PINELLAS PARK, FL 33782 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: P/D () Delete
Name: PAXSON, ALISON
Address: 1860 70TH CIRCLE N
City-St-Zip: SAINT PETERSBURG, FL 33702 US

Title: T/D () Delete
Name: GRECO, LAURA W
Address: 6045 96TH TERRACE
City-St-Zip: PINELLAS PARK, FL 33782

Title: S/D () Delete
Name: GRANBY, SUSAN L
Address: 6665 68TH ST
City-St-Zip: PINELLAS PARK, FL 33781

Title: V/D () Delete
Name: WEST, BRENDA M
Address: 5000 47TH AVENUE NORTH
City-St-Zip: ST. PETERSBURG, FL 33709

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/D (X) Change () Addition
Name: PAXSON, ALISON
Address: 517 101ST AVE N
City-St-Zip: SAINT PETERSBURG, FL 33702 US

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: LAURA W GRECO

T/D

01/17/2008

Electronic Signature of Signing Officer or Director

_____ Date