SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandça B. Mortham

Secretary of State
DIVISION OF COMPORATIONS

DOCUMENT # P96000081625 (1)

GYMNASTICS ETC., INC.

FILED

97 AUG -6 AM 9: 15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

| Dringing! Dies | a of Division | 11 T . A . I . | | |
|---|--|--------------------------------------|---------------------|--|
| Principal Plac | e or Business | Mailing Address | | |
| 941 CUMBERL | | 941 CUMBERLAND STREET | | |
| LAKELAND FL | 33801 | LAKELAND FL 33801 | | DO NOT WRITE IN THIS SPACE |
| | | | | 3. Date Incorporated or Qualified 3a. Date of Last Report |
| | | | | |
| 2. Principal P | lace of Business | 2a. Mailing Address | | 10/02/1996 4. FEI Number 4.0 Applied For |
| | | | 1. as c. | |
| Suite, Apt. | 1 Local 8P pert 211 5 | 26 3 705 U.S. Suite, Apt. #, etc. | (1014 10 2 or | |
| | z 3 | 27 Suite 3 | | 5. Certificate of Status Desired \$8.75 Additional |
| City & State City & State | | | | Fee Required |
| عا لحداد | ila d FL | 1 · · · · · | FL | 6. Election Campaign Financing \$5.00 May Be |
| Zin Zin | | 28 Lakeland, | Country | Trust Fund Contribution Added to Fees |
| 24 338 | 13 25 (LSA. | 29 33813 3 | Jus.A. | 8. This corporation owes or has paid the current year Intangible |
| | | | | Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent |
| | | | | |
| WILDON PRILIP WONTMAN III | | | | |
| 941 CUMBERLAND STREET , Ap+ 2 82 Street Address | | | | ress (P.O. Box Number is Not Acceptable) |
| LAKELAND FL 33801 | | | | |
| | | | 83 | |
| | | | 84 City | 85 Zip Code |
| | | | | |
| 11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered | | | | |
| office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and account the obligations of, Section 807.0505, Florida Statutes. | | | | |
| | | | | |
| SIGNATURE Signature by d of printed not you're gistined agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE | | | | |
| 12. | OFFICERS AND I | DIRECTORS | 13. | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |
| TITLE | President | DELETE | 1.1 TITLE | Change Addition |
| NAME | William Philip Wor | tman III | 1.2 NAME | |
| STREET ADDRESS | Wilbur Philip Wor 941 Cumberland St. Lakeland, Fz 3380 | Act. 2 | 1.3 STREET ADDRESS | 700022643277 -08/12/9701037011 ****165.00 ****165.00 |
| CITY-ST-ZIP | 1 - Lala - L 53 33Px | -4 - | 1.4 CITY - ST- ZIP | -08/15/3(0103(011 |
| TITLE | Caretara, 10 3300 | DELETE | 2.1 TOLE | ************************************ |
| NAME | | L. | 2.2 NAME | C Stimile |
| STREET ADDRESS | | | | |
| | | | 2.3 STREET ADDRESS | |
| CITY-ST-ZIP | | ☐ DELETE | 2.4 CITY-ST-ZIP | |
| TITLE | | ↓ DELETE | 31 TITLE | Change Addition |
| NAME | | | 3.2 NAME | |
| STREET ADDRESS | | | 3.3 STREET ADDRESS | |
| CITY-ST-ZIP | | | 3.4. CITY-ST-ZIP | |
| TITLE | | L_ DELETE | 41 TITLE | Change Addition |
| NAM | | | 4. 2 NAME | |
| STREET ADDRESS | | | 4.3 STHEET ADDRESS | |
| CITY-ST-ZIP | | | 4.4 CiTY-ST-ZIP | |
| TITLE | | DELETE | 5.1 TITLE | Change Addition |
| NAME | | | 5.2 NAME | ····· - |
| STREET ADDRESS | | | 5.3 STREET ADDRESS | |
| CITY-ST-ZIP | | | 5.4 CITY - ST - ZIP | .1 |
| TITLE | | DELETE | 6.1 TITLE | . Old Change Addition |
| NAME | | | 6.2 NAME | |
| i | | | | 8 X ~ 1 |
| STREET ADDRESS | | | 6.3 STREET ADDRESS | χ΄ 0 |
| CITY-ST-ZIP | ov certify that the information supplied | with this filling does not out the | 6.4 CITY-ST-ZIP | d in Cooling 110 07/0V/) Florido Statute 1/1 of the cooling of the |
| 14. I do 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 annual report or supplemental annual report is true and accurate and that my signature shall have the same logal effect as if made under oath; that I am an officer or director of the proporation or the director or trustee compowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block/13 if changed prior in attachment with an address. | | | | |
| appears in Block 12 or Block/13 if changed pron in attachment with an address. | | | | |
| DIVIAN CHILD AND CHEEN A LIVIAN AND LANCES AND CHEEN | | | | |

HAMIC JONES HAMIC NALLEY & STURWOLD P.A.

July 18, 1997

Division of Corporations Annual Reports Section P.O. Box 1500 Tallahassee, Florida 32302-1500

RE: Gymnastics, Etc. #59-3405331

Gentlemen:

Please find enclosed, the 1997 Profit Corporation Annual Report along with a check in the amount of \$165.00 for the above referenced corporation.

This corporation was formed in October of 1996. The owner did not receive a form from the state for the annual report and he was unaware of the requirement to file one. We wish to emphasize that there was no intent on the taxpayer's part to disregard this report. Due to his lack of knowledge, we respectfully request you accept his filing fee of \$165.00 and ask that you waive the penalty assessed. If the taxpayer had received the form, he would have filed the form as soon as he received it.

Your assistance in this matter is greatly appreciated.

Sincerley,

R. Guerry Jones, CPA

RGJ/cmo