

**2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P94000087465

**Entity Name:** TWISTER GYMNASTICS BOCA RATON, INC.**Current Principal Place of Business:**3100 N.W. BOCA RATON BLVD  
#308  
BOCA RATON, FL 33431**Current Mailing Address:**PO BOX 811644  
BOCA RATON, FL 33481 US**FEI Number:** 65-0537262**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SIKORA, RANDALL P  
2101 NW 19TH WAY  
BOCA RATON, FL 33431 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:**\_\_\_\_\_  
Electronic Signature of Registered Agent\_\_\_\_\_  
Date**Officer/Director Detail :**Title P  
Name SIKORA, RANDALL P.  
Address PO BOX 811644  
City-State-Zip: BOCA RATON FL 33481Title VP  
Name SIKORA, KELLY S  
Address PO BOX 811644  
City-State-Zip: BOCA RATON FL 33481Title VP  
Name KENT, CLAYTON  
Address PO BOX 811644  
City-State-Zip: BOCA RATON FL 33481Title DIRECTOR  
Name DAMIANI, JESSICA  
Address PO BOX 811644  
City-State-Zip: BOCA RATON FL 33481

*I hereby 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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** RANDALL P. SIKORA

PRESIDENT

01/31/2022

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date