


**2008 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Mar 28, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # F07014**  
 1. Entity Name  
**LA FLEUR'S GYMNASTIC CLUB, INC.**



Principal Place of Business 8550 126TH AVE. NORTH LARGO, FL 33773 US	Mailing Address 8550 126TH AVE. N LARGO, FL 33773 US
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**DO NOT WRITE IN THIS SPACE**



01182008 No Chg-P CR2E034 (11/05)

4. FEI Number <b>59-2034334</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

**6. Name and Address of Current Registered Agent**

LAFLEUR, MICHAEL J PRES  
 8550 126TH AVE. N.  
 LARGO, FL 33773

**DO NOT WRITE IN THIS SPACE**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE 04/10/08-80065-012 150.00

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

*PD # 13714 \$150.  
 7-25-08*

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRES LAFLEUR, MICHAEL J 8550 126TH AVE N. LARGO, FL 33773
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP LAFLEUR, MELODY 8550 126TH AVE. N. LARGO, FL 33773
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SEC LAWSON, KAREN 8550 126TH AVE N LARGO, FL 33773
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREA PARRAGA, LAURA 8550 126TH AVE N LARGO, FL 33773
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** *Michael J. Lafleur* **Date:** *3-21-08* **Daytime Phone #:** *727-398-6711*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR