

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H29493

**FILED**  
**Jan 05, 2006**  
**Secretary of State**

**Entity Name:** SUNCOAST GYMNASTICS ACADEMY INC.

**Current Principal Place of Business:**

8004 CONGRESS ST  
PORT RICHEY, FL 34668 US

**New Principal Place of Business:**

**Current Mailing Address:**

10617 MAGRATH LANE  
NEW PORT RICHEY, FL 34654 US

**New Mailing Address:**

10240 HILLTOP DR.  
NEW PORT RICHEY, FL 34654 US

FEI Number: 59-2468340

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

GWINN, ARNOLD  
10617 MAGRATH LN  
PORT RICHEY, FL 34668 US

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

GWINN, ARNOLD  
10240 HILLTOP DR.  
NEW PORT RICHEY, FL 34654 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: \_\_\_\_\_

01/05/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: C (X) Delete  
Name: DUMEND, DONALD L.  
Address: 9014 GOLDEN POND CT.  
City-St-Zip: NEW PORT RICHEY, FL

Title: PS ( ) Delete  
Name: GWINN, ARNOLD  
Address: 10617 MAGRATH LN  
City-St-Zip: PORT RICHEY, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: PS (X) Change ( ) Addition  
Name: GWINN, ARNOLD  
Address: 10240 HILLTOP DR.  
City-St-Zip: NEW PORT RICHEY, FL 34654

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

SIGNATURE: ARNOLD GWINN

PS

01/05/2006

Electronic Signature of Signing Officer or Director

Date