
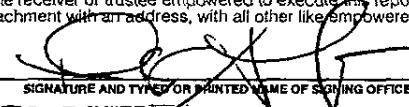


**2005 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 21, 2005 08:00 AM
Secretary of State

DOCUMENT # N00000005650		
1. Entity Name KEEP FLIPPIN GYMNASTICS AND FITNESS NPO, INC.		
Principal Place of Business 6761 INDIAN TOWN RD #28 JUPITER, FL 33458	Mailing Address 6761 INDIAN TOWN RD #28 JUPITER, FL 33458	
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent TESORIERE, DARYL SUE 13110 169TH CT. N JUPITER, FL 33478		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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reconstituting)</small>		
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TESORIERE, DARYL SUE 13110 169TH CT. N JUPITER, FL 33478	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D QUICK, ALICIA 417 GEORGIAN PARK DR JUPITER, FL 33458	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MYERS, KATHERINE R 16900 122ND DR N JUPITER, FL 33478	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
12. I 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 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 617, 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: 		4/14/05 (561) 745-2511 Date Daytime Phone #



04142005 No Chg-NP CR2E037 (10/03)

4. FEI Number
65-1035451

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

U00000322080
04/21/05-80104-015 61.25

**DO NOT WRITE
IN THIS SPACE**