

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000004487

FILED
Apr 30, 2007
Secretary of State

Entity Name: ROYAL GEMZ CHEERLEADING, INC.

Current Principal Place of Business:

440 TALL PINES ROAD
SUITE K
WEST PALM BEACH, FL 33413

New Principal Place of Business:

Current Mailing Address:

440 TALL PINES ROAD
SUITE K
WEST PALM BEACH, FL 33413

New Mailing Address:

FEI Number: 65-1123872

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SEDORE, LORI L
440 TALL PINES ROAD
SUITE K
WEST PALM BEACH, FL 33413 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: SEDORE, LORI L
Address: 152 2ND STREET
City-St-Zip: WEST PALM BCH, FL 33413

Title: D () Delete
Name: SEDORE, KEVIN
Address: 152 2ND STREET
City-St-Zip: WEST PALM BCH, FL 33413

Title: D () Delete
Name: PAQUETTE, SHARON
Address: 152 2ND STREET
City-St-Zip: WEST PALM BEACH, FL 33413

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: SEDORE, LORI L
Address: 138 WATERWAY ROAD
City-St-Zip: ROYAL PALM BEACH, FL 33411

Title: D (X) Change () Addition
Name: SEDORE, KEVIN
Address: 138 WATERWAY ROAD
City-St-Zip: ROYAL PALM BEACH, FL 33411

Title: D (X) Change () Addition
Name: PAQUETTE, SHARON
Address: 138 WATERWAY ROAD
City-St-Zip: ROYAL PALM BEACH, FL 33411

I hereby certify that the information supplied with this filing does not qualify 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LORI SEDORE

PRES

04/30/2007

Electronic Signature of Signing Officer or Director

Date