

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000006836

FILED
Apr 24, 2009
Secretary of State

Entity Name: TROUSDELL GYMNASTICS CENTER BOOSTER CLUB, INC.

Current Principal Place of Business:

TROUSDELL GYMNASTICS CENTER
326 JOHN KNOX RD
TALLAHASSEE, FL 32303

New Principal Place of Business:

Current Mailing Address:

TROUSDELL GYMNASTICS CENTER
326 JOHN KNOX RD
TALLAHASSEE, FL 32303

New Mailing Address:

FEI Number: 04-3713868

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AKER, MIGNETTE
3333 LAKESHORE DRIVE
TALLAHASSEE, FL 32312 US

Name and Address of New Registered Agent:

LANE, LORI
383 THORNBERG DRIVE
TALLAHASSEE, FL 32312 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: LORI LANE

04/24/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: AKER, MIGNETTE
Address: 3333 W LAKESHORE DR
City-St-Zip: TALLAHASSEE, FL 32312

Title: VD () Delete
Name: SCHREMSE, CHRIS
Address: 3107 AVON CIRCLE
City-St-Zip: TALLAHASSEE, FL 32312

Title: D () Delete
Name: CLINE, RENE
Address: 275 ASHTON CT
City-St-Zip: QUINCY, FL 32352

Title: TD () Delete
Name: KENYON, JOSEPHINE
Address: 2220 GATES DR.
City-St-Zip: TALLAHASSEE, FL 32312

Title: SD (X) Delete
Name: DYE, MARYBETH
Address: 424 EL DESTINADO DR
City-St-Zip: TALLAHASSEE, FL 32312

Title: D (X) Delete
Name: LANE, LORI
Address: 383 THORNBERG DR
City-St-Zip: TALLAHASSEE, FL 32312

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: LANE, LORI
Address: 383 THORNBERG DRIVE
City-St-Zip: TALLAHASSEE, FL 32312

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

Title: TD (X) Change () Addition
Name: WARD, LAURA
Address: 7757 CRICKLEWOOD DRIVE
City-St-Zip: TALLAHASSEE, FL 32312

Title: SD (X) Change () Addition
Name: BROOKS, MARIANNE
Address: 1125 SANDLER RIDGE ROAD
City-St-Zip: TALLAHASSEE, FL 32317

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

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

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: MARIANNE BROOKS

SD

04/24/2009

Electronic Signature of Signing Officer or Director

Date