

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000007071

FILED
Sep 02, 2008
Secretary of State

Entity Name: GYMSTAR BOOSTER CLUB OF DAYTONA BEACH, INC.

Current Principal Place of Business:

1101 N. ATLANTIC AVE
DAYTONA BEACH, FL 32118

New Principal Place of Business:

Current Mailing Address:

1101 N. ATLANTIC AVE
DAYTONA BEACH, FL 32118

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

RICE, PAUL E JR.
222 SEABREEZE BLVD.
DAYTONA BEACH, FL 32118 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: PD () Delete
Name: AMOLS, BARI
Address: 35 RIVER RIDGE TRAIL
City-St-Zip: ORMOND BEACH, FL 32174

Title: VD () Delete
Name: PAPPAS, PATTY
Address: 39 NEPTUNE AVE
City-St-Zip: ORMOND BEACH, FL 32176

Title: T () Delete
Name: MAJEWSKI, PATRICIA
Address: 40 WISTERIA DR
City-St-Zip: ORMOND BEACH, FL 32176

Title: SD () Delete
Name: HAREN, CARA
Address: 1789 CHERRY LAURL DR
City-St-Zip: ORMOND BEACH, FL 32174

Title: T (X) Delete
Name: MCGRANE, GENIE
Address: 2001 N. BEACH ST.
City-St-Zip: ORMOND BEACH, FL 32174

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MAJEWSKI, PATRICIA
Address: 40 WISTERIA DR
City-St-Zip: ORMOND BEACH, FL 32176

Title: T (X) Change () Addition
Name: BOSSARDET, MELISSA
Address: 1100 FLAGSTONE DRIVE
City-St-Zip: DAYTONA BEACH, FL 32118

Title: SD (X) Change () Addition
Name: HAREN, CARA
Address: 1789 CHERRY LAUREL DRIVE
City-St-Zip: ORMOND BEACH, FL 32174

Title: H (X) Change () Addition
Name: JOHNSON, JEWEL
Address: 474 CHELSEA PLACE
City-St-Zip: ORMOND BEACH, FL 32174

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: MELISSA BOSSARDET

Electronic Signature of Signing Officer or Director

T

09/02/2008

Date